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15/17/54
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CITY OF MANCHESTER

REPORT

ON THE

HEALTH OF THE
CITY OF MANCHESTER

FOR 1953

BY THE

MEDICAL OFFICER OF HEALTH

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HEALTH DEPARTMENT,
TOWN HALL,
MANCHESTER, 2.

29th June, 1954

MY LORD MAYOR, ALDERMEN AND MEMBERS OF THE CITY COUNCIL,

I have pleasure in presenting my report on the health of the City for the year 1953.

Tables of vital statistics for the year are shown on pages 18 to 30A.

Vital Statistics.

The main points of interest concerning the vital statistics for the year 1953 in comparison with previous years and England and Wales are as follows:—

Registrar General's estimated population (mid-year).

	1953	1952	1951 (Census)
Total	701,800	705,400	703,175
Males	331,098	332,794	331,748
Females	370,702	372,606	371,427

Marriages.

	1953	1952
Number of marriages registered ..	6,052	6,464
Marriage rate per 1,000 population	17.25	18.33

Births.

Registered live births number 12,218 (6,351 males, 5,867 females), giving a rate of 17.41 per 1,000 population compared with 17.53 in 1952, a decrease of 0.12. The birth rate for England and Wales was 15.5, an increase of 0.1 on the previous year.

Of the 12,218 births, 11,450 (5,955 males, 5,495 females) or 93.71 per cent. were legitimate and 768 (396 males, 372 females) or 6.29 per cent. were illegitimate. The percentage of illegitimate births in 1952 was 6.62, which is a decrease of 0.33. The ratio of illegitimate to legitimate was 1 to 15.

There were 355 stillbirths (194 males, 161 females) giving a rate of 28.6 per 1,000 total births, which is 0.79 higher than the rate for 1952. The rate of registered "still" to registered "live" births was 1 to 34. The rate for England and Wales was 22.4.

Deaths.

The number of deaths allocated to the City during the year was 8,600 (4,431 males, 4,207 females), a ratio to the population of 1 in 81, or a death rate per 1,000 of the population of 12.31 as compared with 12.16 for 1952 and an average of 12.79 for the previous five years. The rate for England and Wales was 11.4.

The following table shows the principal causes of death during the year comparison with the previous year:—

	1953			1952		
	Number of deaths	Rate per 1,000 population	Percentage of total deaths	Number of deaths	Rate per 1,000 population	Percentage of total deaths
Tuberculosis, respiratory ..	198	0.28	2.29	269	0.38	3.14
Tuberculosis, other	18	0.03	0.21	24	0.03	0.28
Cancer, all sites	1,519	2.16	17.59	1,536	2.18	17.91
Cancer, lung and bronchus ..	337	0.48	3.90	326	0.46	3.80
Cerebral lesions of central nervous system	1,151	1.64	13.32	1,108	1.57	12.92
Heart disease, all forms	2,550	3.63	29.52	2,491	3.54	29.05
Diabetes	858	1.22	9.93	836	1.19	9.75
Respiratory diseases except tuberculosis	1,307	1.86	15.13	1,202	1.70	14.02
Influenza	102	0.15	1.18	24	0.03	0.28
Pneumonia, all forms	338	0.48	3.91	336	0.48	3.92
Scarlet fever	791	1.13	9.16	741	1.05	8.64
Septicæmia	292	0.42	3.38	312	0.44	3.64
Septicæmia	332	0.47	3.84	290	0.41	3.38

There was again a reduction in the number of deaths from tuberculosis, both of the respiratory system and all other forms, making this again the lowest number of deaths ever recorded. The mortality rate of 0.28 for respiratory tuberculosis is the lowest ever recorded, whilst that for other forms equals the previous lowest rate in 1952.

There was a slight decrease in the number of deaths from cancer (all sites) and a slight increase in the number of deaths from cancer of the lung or bronchus, 290 males and 47 females as compared with 284 and 42 respectively in 1952. Of the total number of deaths from cancer (all forms) 52.5 per cent. were 65 years of age and over.

There was one death from diphtheria, a non-immunised woman aged 33 years. Other deaths from infectious diseases were whooping cough 4, meningococcal infections 6, measles 2, and acute infectious encephalitis 3. There were no deaths from acute poliomyelitis.

Infant Mortality.

Deaths of infants under one year of age registered during 1953 numbered 30.53. This was a decrease of 51 on the figure for the previous year and gives a rate of 30.53 per 1,000 live births, 3.75 lower than for 1952. This is the lowest infant mortality rate recorded for Manchester. The rate for England and Wales was 26.8.

The number of neo-natal deaths was 256 giving a rate of 20.87 per 1,000 live births as compared with 269 deaths and a rate of 21.75 in 1952. The lowest recorded neo-natal death rate was 18.43 in 1949.

Maternal Mortality.

There were no deaths from puerperal and post-abortive sepsis during 1953, and 10 deaths from other maternal causes. The maternal death rate was 0.80 per 1,000 total births compared with 0.71 for 1952, which was the lowest ever recorded in the City. The maternal death rate for England and Wales was 0.76, which was also a slight increase on the rate for the previous year of 0.72.

Mental Health Service.

This important service has been steadily expanding since its inception in July, 1948, and as it grows the horizon widens and the wisdom of establishing the service becomes more and more apparent. It is already obvious that although a good start has been made the scope and need for further expansion is great. The shortage of consultant psychiatrists has hitherto presented obstacles to obtaining adequate specialist advice in connection with this service but with the approval of the Health Committee arrangements have now been made with a psychiatrist of senior consultant rank to give advice within the limits of the time he can afford. There is a continuing shortage of hospital accommodation for cases of mental illness and for cases of mental deficiency.

Infectious Diseases and Immunization.

Smallpox.

Special precautions were necessary in the City because of the prevalence of cases of smallpox in other areas in South-East Lancashire in 1953, but fortunately no smallpox cases were found in Manchester. Indeed, no case has been infected with smallpox in the City since 1930—a severe case of smallpox infected elsewhere was found in 1946 but he was suffering from another disease when he arrived in this area. No further cases were reported in Manchester as a result of this case. This fortunate experience over a long period of years can be expected to continue only if the vaccination level is raised. About 63 per cent. of infants were vaccinated in the years immediately prior to 1948 when compulsory vaccination was abolished. In 1949, the corresponding percentage had fallen to the disastrously low level of 27.4. As a result of new administrative measures the percentage has been raised to 47.4 in 1953. Although the number of vaccinations is still much too low we would prefer to rely on persuasion rather than on compulsion and would be welcome at present a return to the principle of compulsory vaccination.

Poliomyelitis.

During the year, there was a reduction in the number of cases of poliomyelitis compared with previous years. No deaths occurred from the disease in 1953. For some reason not ascertained, Manchester had a lower incidence of poliomyelitis relative to the size of population than other large cities in the country. But there is no reason for complacency—until research workers have discovered a reliable means of preventing and dealing with outbreaks we must expect further cases, particularly in late summer.

Measles.

There was a high incidence of measles in the first four months of the year. Thereafter, the number of notified cases fell to almost negligible proportions and that position continues at the time of writing this report. Measles tends to reach a high peak at intervals of about two years and therefore is expected that another peak will occur about the end of 1954.

Whooping Cough.

The efficacy of immunization against whooping cough is now well established. The scheme of whooping cough immunization research ended in 1952 and since then immunization has been continued as a routine measure by the Health Department.

Food Poisoning.

There has been a notable reduction of the reported incidence of food poisoning which in 1953 was almost half of that in 1952. There is still much to be done in relation to the improvement of food hygiene.

The Murkiness of Smog.

The ugly word smog has been invented to describe the result of atmospheric pollution. The equally ugly word MURK has been invented to describe a unit of measurement of dirt in the air. Both words, ugly though they may be, are the most useful in stimulating attention to the question of pollution by smoke and its abatement. A new type of apparatus has been devised for the measurement of the number of murks, at the laboratory of the Shirley Institute in Salford. This represents an advance in the technique of measurement and is to be warmly welcomed. Further details will be found in the section of this report headed Smoke Abatement.

The central smokeless zone has continued to attract public attention and approval. Its success has encouraged further efforts in smoke abatement and three more smokeless zones have been planned, one of which awaits Ministry approval.

Housing.

The intractable problem of unsatisfactory housing conditions will inevitably continue for many years. A programme of slum clearance has been commenced and the City Council has received and approved a large number of representations in relation to unfit houses. Many thousands of unfit houses await representation but it would not be desirable to make official representations at a rate faster than the present one in that there would be no point in getting ahead more than a little ahead, as at present, of the capacity for erecting new houses. The need for the provision of new houses as fast as possible is as urgent as ever.

Water Supply.

Recent proposals of the Waterworks Committee for the increased protection of the water supplies are welcomed. The quality of a public water supply should reach the highest possible standard. Potential factors which affect safety are referred to in the appropriate section of this Report.

I again express my grateful thanks to Dr. William Chadwick, the Chairman of the Health Committee, and to the members of the Health Committee for their continued support and encouragement and to my colleagues in the Health and other Departments of the Corporation for their very great help.

I have the honour to be,

My Lord Mayor, Ladies and Gentlemen,

Your obedient servant,

CHARLES METCALFE BROWN,

Medical Officer of Health

HEALTH COMMITTEE.

1953-54.

CHAIRMAN—Councillor W. Chadwick, M.B., CH.B.

DEPUTY CHAIRMAN—Councillor J. McGrath.

THE LORD MAYOR—Alderman A. Moss, J.P., M.A.

Alderman	J. E. Burgess	Councillor	J. Conway
„	T. M. Larrad, J.P.	„	Eveline Hill, M.P., J.P.
„	W. Onions, M.B.E., J.P.	„	Mary Knight
„	F. E. Tylecote, J.P., M.D., F.R.C.P.	„	B. Lawson
„	T. Walker, J.P.	„	T. Lomas
Councillor	Hannah Baldwin, J.P.	„	G. McCall
„	Nellie Beer, J.P.	„	W. Sharp
„	James Bowes	„	A. R. Smith
„	P. Buckley, M.B., B.CH., B.A.O.	„	Lily Thomas, J.P.
„	P. Chadwick, J.P.	„	R. E. Thomas, J.P.
		„	Mabel S. Whittaker, J.P.

SUB-COMMITTEES.

The following sub-committees are appointed to carry out certain of the duties referred to the Health Committee; these are particularised below. With the exception of those of the Sanitary Defects Sub-committee, their proceedings are subject to approval by the Health Committee.

Sanitary.

Sanitation and buildings; nuisance and offensive trades; common lodging houses and houses let in lodgings; factories; workplaces and shops; provision regarding food and drugs; poisons and pharmacy; public conveniences; the granting of certificates of disrepair and reports to owners under the Rent and Mortgage Restrictions Acts; the Rag Flock and Other Filling Materials Act, 1951; the Shops Act, 1950, and the Young Persons (Employment) Act, 1938; the abatement of smoke nuisances and atmospheric pollution; hairdresser registration; street traders and persons trading in food on open sites; and all questions relating to the management and administration of the Sanitary Services Division with the exception of those relating to the appointment of staff, salaries, wages and conditions of service of officers and servants.

Sanitary Defects.

To this Sub-committee are delegated under Section 273 of the Public Health Act, 1936, the Health Committee's powers to deal with urgent cases of sanitary defects in premises and it is empowered to authorise the service of notices upon owners, occupiers or other persons responsible requiring them, within the period specified in the notices, to execute the works required and, in the event of the notices not being complied with, to instruct the Medical Officer of Health to carry out the work required and/or to instruct the Town Clerk to institute the necessary summary proceedings.

Maternity and Child Welfare.

Maternity and child welfare, including all the duties in the proposals of the City Council under the National Health Service Acts, relating to midwife health visiting, care of mothers and young children (excepting the portion relating to the management of Knowle House), home nursing, prevention of illness, care and after-care and domestic helps; the cleansing of persons infested with vermin; the control and management of day nurseries; and the administration of the Nursing Services Division with the exception of questions relating to the appointment of staff, salaries, wages and conditions of service of officers and servants.

Health Centres.

All matters relating to the planning, siting, erection and equipment of health centres, and to undertake, as and when they are erected, the control and management of health centres in the City with the exception of questions relating to the appointment of staff, salaries, wages and conditions of service of officers and servants.

Mental Health.

All matters arising out of the proposals of the City Council under the National Health Service Act concerning mental health with the exception of questions relating to the appointment of staff, salaries, wages and conditions of service of officers and servants.

Ambulance and Transport.

All matters relating to the control and management of ambulances and ambulance stations, passenger cars and other vehicles and garages, with the exception of questions relating to the appointment of staff, salaries, wages and conditions of service of officers and servants.

Residential Homes.

All matters relating to the control and management of Dr. Garrett Memorial Home, Knowle House, Langho Colony, Ashton House and Walton House, with the exception of questions relating to the appointment of staff, salaries, wages and conditions of service of officers and servants, and the purchase of bulk supplies.

Staff.

All questions affecting the appointment of staff, salaries, wages and conditions of service of officers and servants in the employ of the Health Committee.

Supplies.

The purchase of bulk supplies of articles required by Langho Colony, Dr. Garrett Memorial Home, Knowle House, Ashton House, Walton House and the day nurseries, and those required by the Children's, Education and Welfare Services Committee for use at residential institutions under their control.

HEALTH OFFICERS.

(A) Medical

C. Metcalfe Brown, M.D., D.P.H., Barrister-at-Law	Medical Officer of Health
A. M. M. Grierson, O.B.E., M.D., D.P.H., F.R.S.E.	Deputy Medical Officer of Health
B. J. Griffiths, B.Sc., M.R.C.S., L.R.C.P., D.P.H.	Senior Medical Officer—Administrative
Winifred A. Kane, M.R.C.S., L.R.C.P., D.P.H.	Senior Medical Officer—Nursing Service (resigned 15.3.53)
Alice I. Burke, M.B., CH.B., D.P.H. . .	Senior Medical Officer—Nursing Service (appointed 16.3.53)
Anne Doreen Lepine, M.R.C.S., L.R.C.P.	Medical Officer (Diphtheria Immunization)
M. J. Greenberg, M.B., M.R.C.P. . .	Consultant Chest Physician—Part-Time

(B) Other Professional

J. Lawson, M.R.SAN.I.	Chief Sanitary Inspector (retired 12.8.53)
J. Graham, M.R.SAN.I.	Chief Sanitary Inspector (appointed 13.8.53)
Alfred N. Leather, B.Sc., F.R.I.C. . .	Public Analyst

(c) Lay

C. Hay, M.B.E.	Chief Administrative Assistant—Nursing Services Division
C. W. Wilkinson	Chief Administrative Assistant—General Services Division

General Services Division

GENERAL STATISTICS

METEOROLOGY

VITAL STATISTICS

REGISTRAR GENERAL'S ABSTRACT

INFECTIOUS DISEASES

FOOD POISONING

EPIDEMIOLOGY

MENTAL HEALTH

HEALTH EDUCATION

AMBULANCE SERVICE

HOSPITAL CAR SERVICE

MUNICIPAL CAR POOL

DISINFECTION

RESIDENTIAL HOMES:

Langho Colony for sane epileptics

Dr. Garrett Memorial Home for convalescent children

MUNICIPAL HOSTELS:

Ashton House for women

Walton House for men

GENERAL STATISTICS

Registrar General's estimated population mid-year, 1953

{ Males 331,098 }
 { Females 370,702 } 701,800

census population, 1951 .. { Males 331,748 }
 { Females 371,427 } 703,175

		Males	Females	Total	
live births	{ Legitimate ..	5,955	5,495	11,450 768	.. .. . 12,218
	{ Illegitimate ..	396	372		

live birth rate per 1,000 of population 17.41

		Males	Females	Total	
stillbirths	{ Legitimate ..	175	148	323 32	.. .. . 355
	{ Illegitimate ..	19	13		

stillbirth rate per 1,000 total (live and still births) 28.24

deaths { Males 4,431 }
 { Females 4,207 } 8,638

death rate per 1,000 of population { Males .. 13.38 }
 { Females 11.35 } 12.31

comparability factor { Births 0.95 }
 { Deaths 1.11 }

birth rate as adjusted by factor 16.54

death rate as adjusted by factor 13.66

excess of births over deaths 3,580

percentage of mortality occurring in institutions 46.69

Maternal mortality :—

	Deaths	Rate per 1,000 total births	
Sepsis of pregnancy and abortion	..	..	.. .. . 0.80
Other maternal causes	10	0.80	

Deaths of infants under one year of age:—

All infants 373—rate per 1,000 live births 30.53

Legitimate infants 352—rate per 1,000 legitimate live births .. 30.74

Illegitimate infants 21—rate per 1,000 illegitimate live births .. 27.34

Number of persons married per 1,000 of population 17.25

Area of the City in acres	27,
Number of persons per acre	
Number of occupied structurally separate dwellings at Census 1951	200,
Number of persons per occupied structurally separate dwellings at Census, 1951 ..	3
Number of houses according to Rate Book (1st April, 1953)	208,
Number of persons per house	3
Rateable value (1st April, 1953)	£6,671,
Sum represented by a penny rate (estimated)	£26,
Number of new houses erected during 1953 :	
By local authority	2,541
By other bodies or persons	390
	<hr/>
	2,

The City of Manchester is the centre of one of the largest industrial areas in the world. Road and rail communications, the Port of Manchester and in recent years, Ringway Airport, from which regular transatlantic air services now operate, have combined to retain the City's importance in industry and commerce and its business links with the rest of the world.

Whilst a large percentage of the population is employed in transport and distributive services the chief industries in the City are engineering, textiles and clothing.

In addition to its importance in the industrial world, the City also claims prominence in medical, educational and scientific fields through its hospitals, Medical School, University and College of Technology.

Comprehensive housing schemes are gradually causing the poorly centralised inhabited sites to disappear, and to the north and south of the City there are now large housing estates which have been quoted as examples of the best modern methods.

METEOROLOGY.

Extracts from readings taken at the Whitworth Observatory, Manchester.

	Wet bulb	Dry bulb	Mean maximum temperature	Mean minimum temperature	Mean temperature	Total rainfall (inches)	Total number of wet days	Total hours of sunshine	Number of days on which fog was noted at 09-00 G.M.T.
January	38.3	39.7	43.4	36.6	40.0	1.40	9	10.85	17
February	33.5	40.5	45.8	36.5	41.1	1.68	9	38.36	8
March	39.0	41.5	52.5	35.5	44.0	2.00	6	119.35	18
April	41.2	45.1	52.6	38.5	45.5	2.30	10	155.10	—
May	50.8	56.0	64.9	47.9	56.4	1.83	9	191.58	2
June	54.3	58.4	65.9	51.7	58.8	2.38	13	130.50	3
July	55.7	60.1	67.3	54.4	60.9	4.21	18	168.02	2
August	56.9	61.3	68.5	55.1	61.8	3.74	14	140.70	2
September	53.3	56.6	64.2	51.5	57.9	2.98	13	113.40	9
October	47.1	49.0	56.7	42.6	49.7	2.08	9	70.68	17
November	45.9	47.9	52.3	44.3	48.3	3.22	12	33.90	10
December	43.1	44.5	49.3	40.9	45.1	1.23	10	15.81	19
YEAR ..	47.0	50.0	56.8	44.6	50.8	29.05	132	1188.25	107
	Means					Totals			

VITAL STATISTICS

Registrar General's Return.
Birth rate, death rate, and analysis of mortality, 1953, in England and Wales, grouped areas, London and Manchester.

	BIRTH RATE PER 1,000 TOTAL POPULATION		ANNUAL DEATH RATE PER 1,000 POPULATION								RATE PER 1,000 LIVE BIRTHS		
	Live births	Still births	All causes	Typhoid and paratyphoid	Whooping cough	Diphtheria	Tuberculosis	Influenza	Smallpox	Acute poliomyelitis and polioencephalitis	Pneumonia	Diarrhoea and enteritis (under two years)	Total deaths under one year
England and Wales	15.5	0.35	11.4	0.00	0.01	0.00	0.20	0.16	0.00	0.01	0.55	1.1	26.8
160 county boroughs and great towns, including London . .	17.0	0.43	12.2	0.00	0.01	0.00	0.24	0.15	0.00	0.01	0.59	1.3	30.8
160 smaller towns, estimated resident population 25,000 to 50,000 at 1951 Census . .	15.7	0.34	11.3	—	0.00	0.00	0.19	0.17	0.00	0.01	0.52	0.9	24.3
London Administrative County	17.5	0.38	12.5	—	0.00	—	0.24	0.15	—	0.01	0.64	1.1	24.8
Manchester	17.4	0.51	12.3	—	0.01	0.00	0.31	0.15	—	—	0.48	0.7	30.5

Causes of death.

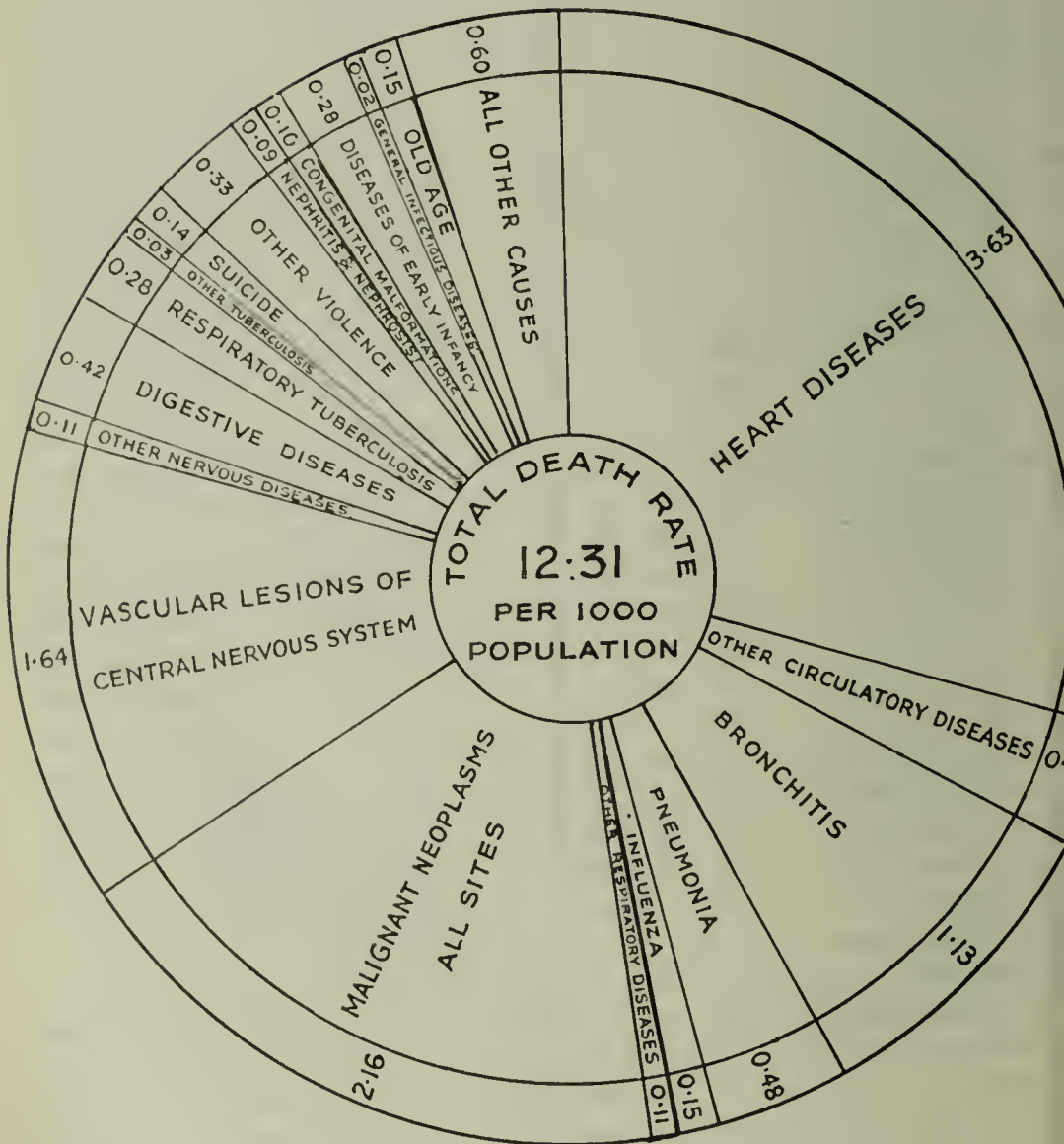
Registrar General's Return.
Manchester.

CAUSES OF DEATH	AGES AT DEATH										
	Male	Female	All ages	0-	1-	5-	15-	25-	45-	65-	75+
Tuberculosis, respiratory	120	69	193	—	1	—	12	55	96	21	13
„ other	12	6	18	—	2	—	3	5	7	1	—
„ Mitral disease	12	5	17	—	—	—	—	—	4	9	4
„ Diphtheria	—	1	1	—	—	—	—	1	—	—	—
„ Whooping cough	2	2	4	3	1	—	—	—	—	—	—
„ Staphylococcal infections	2	4	6	3	2	—	—	—	1	—	—
„ Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—
„ Tetanus	1	1	2	—	2	—	—	—	—	—	—
„ Infective and parasitic diseases	5	15	20	—	2	—	2	4	5	4	3
„ Malignant neoplasm, stomach	127	109	236	—	—	—	—	9	79	91	57
„ „ lung, bronchus	290	47	337	—	—	—	1	18	190	102	26
„ „ breast	—	119	119	—	—	—	—	12	46	30	31
„ „ uterus	—	75	75	—	—	—	—	7	41	20	7
„ Malignant and lymphatic neoplasms	361	301	722	—	3	—	10	53	234	232	190
„ Anaemia, aleukaemia	12	18	30	1	2	2	2	2	10	10	1
„ Tetanus	16	30	46	—	—	—	1	—	16	16	13
„ Cerebral lesions of central nervous system	481	690	1151	—	—	—	3	18	242	369	519
„ Coronary disease, angina	557	301	858	—	—	—	1	26	311	323	197
„ Hypertension with heart disease .. .	97	105	202	—	—	—	—	5	62	70	65
„ Coronary heart disease	502	898	1490	—	—	2	4	63	202	376	783
„ Circulatory disease	154	168	322	—	—	—	1	8	69	98	146
„ Typhoid	43	59	102	1	3	1	—	1	25	32	30
„ Meningitis	183	155	333	49	10	2	1	12	60	107	97
„ Diphtheria	516	275	791	17	4	—	—	13	223	276	258
„ Diseases of respiratory system .. .	56	20	76	3	1	—	2	3	35	19	13
„ Diseases of stomach and duodenum .. .	68	19	87	—	—	—	—	6	34	28	19
„ Enteritis, enteritis and diarrhoea .. .	15	23	38	8	—	1	—	4	10	8	7
„ Nephritis and nephrosis	32	33	65	—	—	1	2	12	24	12	14
„ Hypertrophy of prostate	47	—	47	—	—	—	—	—	3	14	30
„ Miscarriage, childbirth, abortion .. .	—	10	10	—	—	—	2	8	—	—	—
„ Congenital malformations	38	33	71	53	4	—	2	6	4	—	2
„ Undefined and ill-defined diseases .. .	387	440	827	220	2	14	12	49	162	139	229
„ Motor vehicle accidents	60	26	86	—	7	8	11	22	16	9	13
„ Other accidents	83	54	137	12	12	11	10	21	23	22	21
„ Suicide	68	32	100	—	—	—	2	29	48	13	8
„ Deaths and operations of war	5	4	9	3	—	—	—	4	2	—	—
TOTALS ..	4431	4207	8638	373	58	42	84	476	2349	2451	2805

NOTE.—A table showing the mortality rates due to various causes, etc., from 1914 onwards appears at page 30A.

DEATHS FROM PRINCIPAL CAUSES

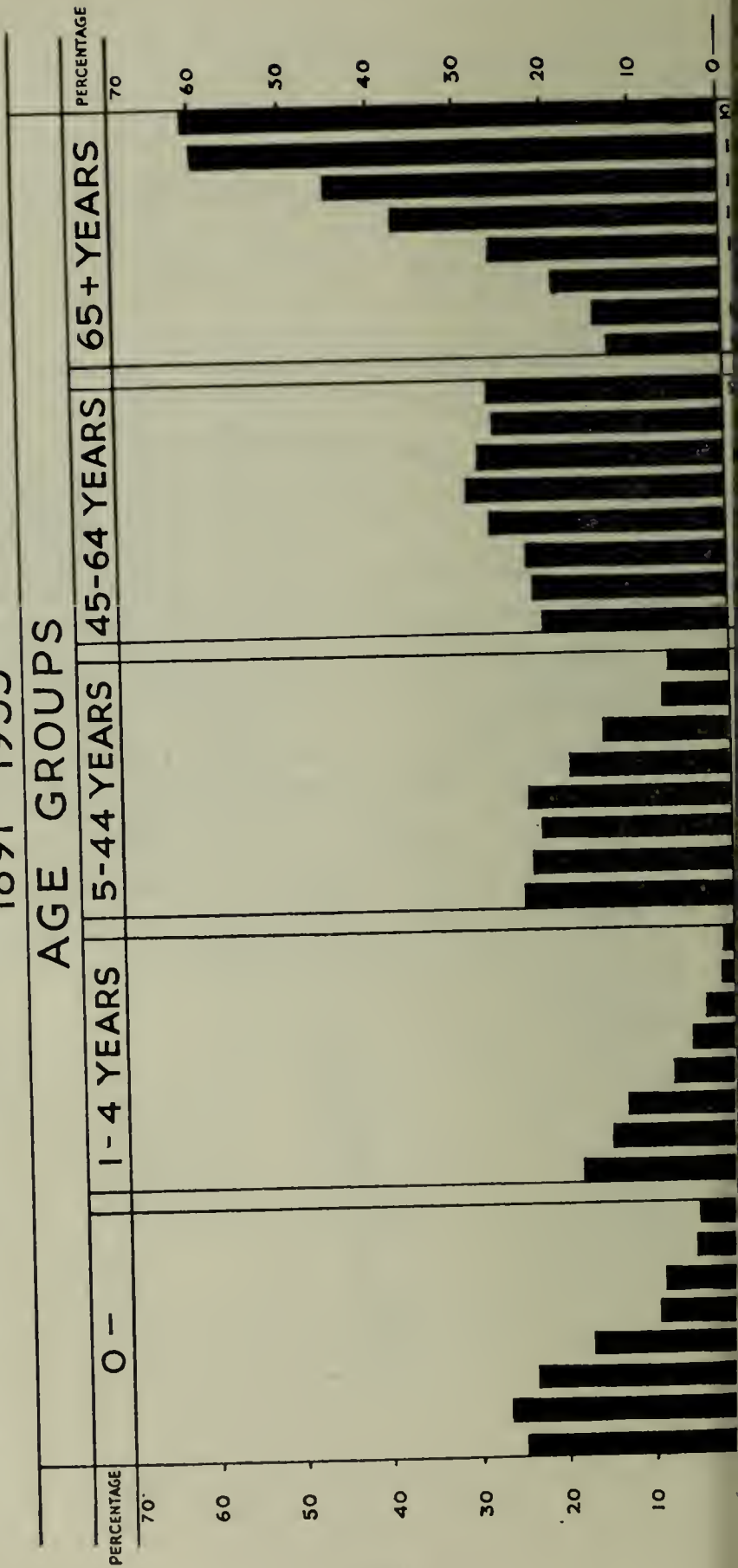
PROPORTION TO TOTAL DEATHS



Deaths in age groups and percentages to total deaths.

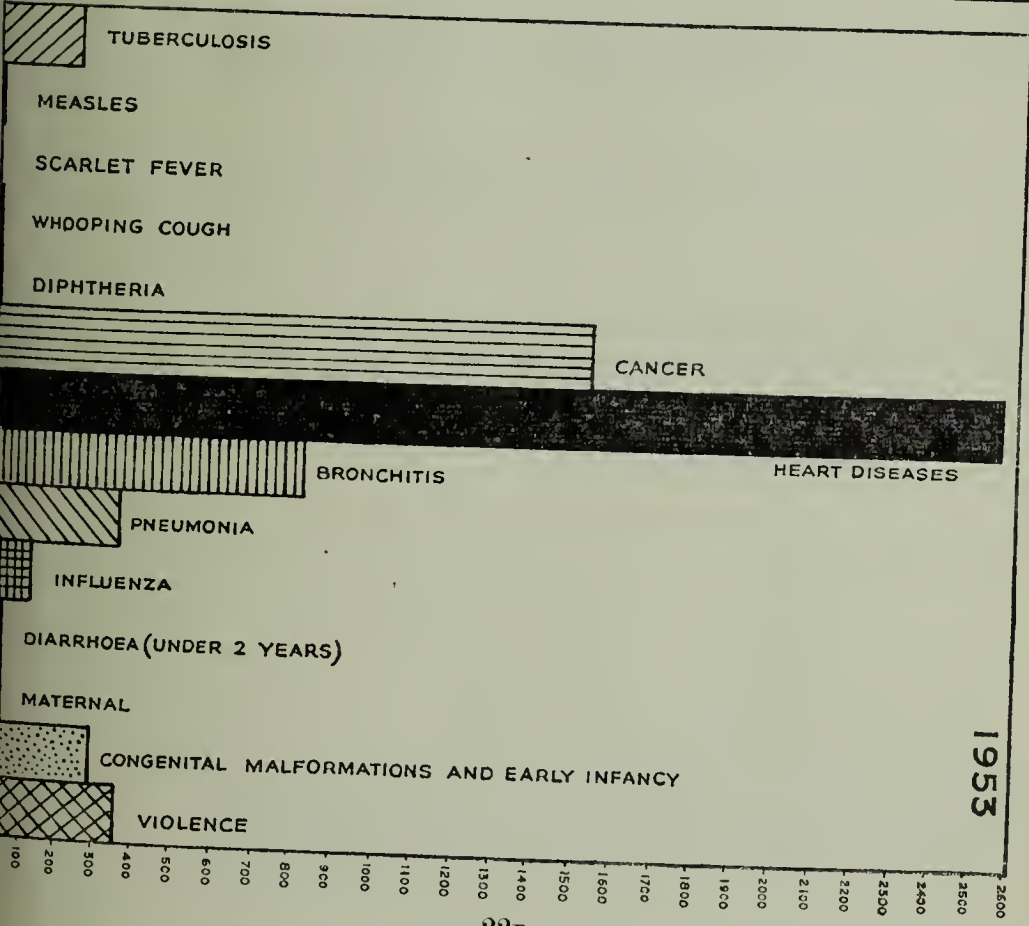
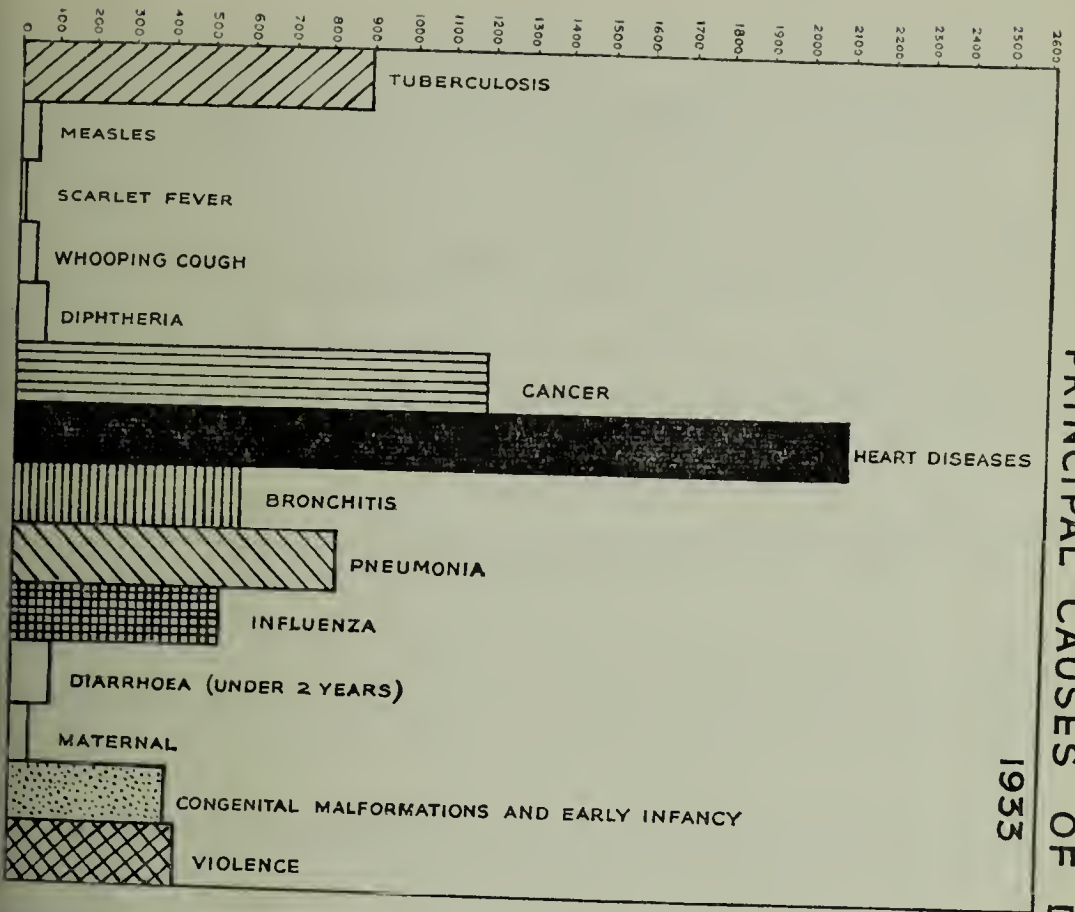
Year	Total number of deaths	Age groups and percentages									
		0—		1—4		5—44		45—64		65+	
		No.	%	No.	%	No.	%	No.	%	No.	%
..	13,202	3,299	24.99	2,225	16.85	3,178	24.07	2,756	20.88	1,744	13.21
..	11,801	3,114	26.39	1,676	14.20	2,725	23.09	2,627	22.26	1,659	14.06
..	12,272	2,901	23.64	1,516	12.35	2,711	22.09	2,790	22.74	2,354	19.18
..	10,093	1,707	16.91	728	7.21	2,313	22.92	2,687	26.62	2,658	26.34
..	10,618	1,027	9.67	503	4.74	1,943	18.30	3,144	29.61	4,001	37.68
..	10,016	832	8.31	265	2.65	1,467	14.65	2,886	28.81	4,566	45.58
..	9,676	439	4.54	64	0.66	748	7.73	2,568	26.54	5,857	60.53
..	8,576	424	4.94	75	0.87	637	7.43	2,410	28.10	5,030	58.65
..	8,638	373	4.32	58	0.67	602	6.97	2,349	27.19	5,256	60.85

PERCENTAGES OF DEATHS IN VARIOUS AGE GROUPS TO TOTAL DEATHS 1891 - 1953



ANIA	BRONCHITIS		DIGESTIVE SYSTEM		GENITO URINARY SYSTEM		ALL CAUSES	
	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate
0.48	792	1.13	292	0.42	172	0.25	8635	12.30
0.74	17	0.78	7	0.32	2	0.09	250	11.49
0.58	33	1.75	9	0.48	3	0.16	225	11.94
0.45	22	1.23	11	0.61	5	0.28	211	11.79
0.72	24	1.58	7	0.46	8	0.53	307	20.15
0.56	21	1.23	12	0.62	4	0.21	236	12.11
0.53	25	1.21	7	0.34	4	0.19	227	11.02
0.52	31	1.35	8	0.35	12	0.52	288	12.55
0.14	16	0.72	2	0.10	7	0.32	253	11.41
0.28	12	0.84	8	0.56	2	0.14	169	11.83
0.50	13	0.65	9	0.45	5	0.25	256	12.78
1.01	12	0.86	4	0.29	3	0.22	217	15.64
0.41	21	0.95	9	0.41	5	0.23	370	16.80
0.69	11	0.64	5	0.29	6	0.35	197	11.39
0.48	39	1.70	7	0.30	6	0.26	320	13.92
0.34	16	0.91	5	0.29	5	0.29	205	11.72
0.37	29	1.55	8	0.43	1	0.05	223	11.90
0.26	17	0.87	9	0.46	6	0.31	235	12.06
0.20	26	1.28	11	0.54		0.15	234	11.52
0.57	11	0.70	6	0.38	3	0.19	213	13.52
0.54	25	1.69	6	0.41	6	0.41	193	13.03
0.72	20	1.03	11	0.57	—	—	245	12.64
0.65	18	0.97	8	0.43	10	0.54	228	12.30
0.44	18	0.88	5	0.24	3	0.15	219	10.70
1.04	32	2.22	9	0.62	3	0.21	268	18.55
0.68	35	1.83	4	0.21	7	0.37	291	15.23
0.77	33	1.69	8	0.41	2	0.10	243	12.42
0.30	18	0.77	14	0.60	4	0.17	213	9.06
0.23	10	0.59	6	0.35	3	0.18	184	10.77
0.31	39	1.71	15	0.66	9	0.39	292	12.79
0.29	19	1.10	10	0.58	5	0.29	211	12.26
0.67	22	1.14	7	0.36	5	0.26	256	13.24
0.82	32	1.75	14	0.77	6	0.33	276	15.12
0.37	29	1.35	12	0.56	6	0.28	243	11.33
0.68	11	0.94	2	0.17	2	0.17	99	8.44
0.07	9	0.59	8	0.52	5	0.33	159	10.40
0.21	23	0.48	9	0.19	6	0.13	379	7.97

PRINCIPAL CAUSES OF DEATH 1933 AND 1953

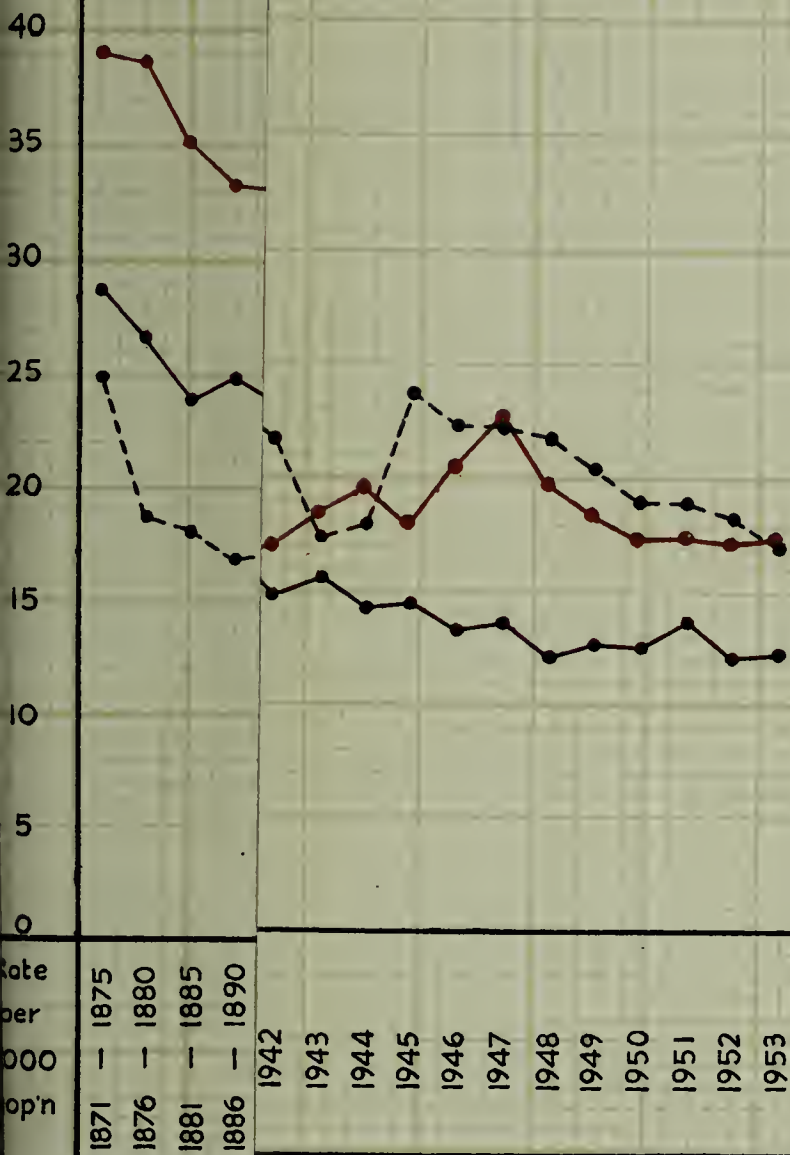


WARDS	Estimated population	Area in acres	Persons per acre	Live births		Deaths		Natural rate of increase	Deaths under 1 year per 1,000 live births	
				Total	Rate per 1,000 pop.	Total	Rate per 1,000 pop.			
CITY OF MANCHESTER ..	701800	27255	25.75	12218	17.41	8635	12.30	+	5.11	30.53
Alexandra Park ..	21758	780	27.89	218	10.02	250	11.49	-	1.47	22.94
All Saints ..	18848	315	59.83	509	27.01	225	11.94	+	15.07	35.36
Arwick ..	17899	436	41.05	455	25.42	211	11.79	+	13.63	26.37
Barlow Moor ..	15236	1120	13.60	180	11.81	307	20.15	-	8.34	11.11
Beswick..	19480	243	80.16	371	19.05	236	12.11	+	6.94	24.26
Blackley ..	20594	1226	16.80	366	17.77	227	11.02	+	6.75	49.18
Bradford ..	22945	772	29.72	429	18.70	288	12.55	+	6.15	32.63
Burnage ..	22177	737	30.09	208	9.38	253	11.41	-	2.03	19.23
Cheetham ..	14284	446	32.03	233	16.31	169	11.83	+	4.48	51.50
Chorlton-cum-Hardy ..	20030	849	23.59	167	8.34	256	12.78	-	4.44	47.90
Collegiate Church ..	13879	501	27.70	276	19.89	217	15.64	+	4.25	28.99
Crumpsall ..	22024	1805	12.20	282	12.80	370	16.80	-	4.00	21.28
Didsbury ..	17292	1181	14.64	218	12.61	197	11.39	+	1.22	13.76
Gorton North ..	22994	540	42.58	360	15.66	320	11.92	+	1.74	47.22
Gorton South ..	17493	631	27.72	274	15.66	205	11.72	+	3.94	40.15
Harpurhey ..	18744	372	50.39	349	18.62	223	11.90	+	6.72	22.92
Levenshulme ..	19492	606	32.17	239	12.26	235	12.06	+	0.20	12.55
Lightbowne ..	20304	390	52.06	275	13.54	234	11.52	+	2.02	18.18
Longsight ..	15755	355	44.38	235	14.92	213	13.52	+	1.40	38.30
Miles Platting ..	14813	444	33.36	293	19.78	193	13.03	+	6.75	40.96
Moss Side East ..	19390	277	70.00	471	24.29	245	12.64	+	11.65	36.09
Moss Side West ..	18532	268	69.15	387	20.88	228	12.30	+	8.58	28.42
Moston ..	20461	1170	17.49	297	14.51	219	10.70	+	3.81	26.94
New Cross ..	14444	354	40.80	327	22.64	268	18.55	+	4.09	18.35
Newton Heath ..	19106	905	21.11	285	14.92	291	15.23	-	0.31	21.05
Newtown ..	23507	498	39.30	489	24.98	243	12.42	+	12.56	53.17
Northenden ..	17077	624	27.37	201	11.77	184	9.06	+	8.64	43.27
Old Moat ..	22824	543	42.03	345	15.12	292	12.79	+	1.00	19.90
Openshaw ..	17207	726	23.70	218	12.67	211	12.26	+	2.33	26.09
Rusholme ..	19335	318	60.80	453	23.43	256	13.24	+	0.41	18.35
St. George's ..	18258	287	63.62	427	23.39	276	15.12	+	10.19	30.91
St. Luke's ..	21439	517	41.47	356	16.61	243	11.33	+	8.27	30.44
St. Mark's ..	11728	837	14.01	181	15.43	99	8.44	+	9.28	16.85
St. Peter's ..	15295	560	27.31	196	12.81	159	10.40	+	6.99	38.67
Withington ..	47581	3392	14.03	1232	25.89	379	7.97	+	1.41	25.51
Wythenshawe ..								+	17.92	28.41

Causes of death in infancy and childhood.
(Figures compiled by Medical Officer of Health.)

CAUSE OF DEATH	Under 1 Year						1 to 5 Years					Total under 5 Years
	Under 4 Weeks	4 Weeks to 3 Months	3-6 Months	6-12 Months	Total	1-2 Years	2-3 Years	3-4 Years	4-5 Years	Total		
											255		38	30	373	23	16	11	8	58
All causes	255	50	38	30	373	23	16	11	8	58	431	
Tuberculosis, respiratory	—	—	—	—	—	—	1	—	—	1	1	
meninges and central nervous system	—	—	—	—	—	—	1	—	—	1	2	
intestine, peritoneum and mesenteric glands	—	—	—	—	—	—	—	—	—	—	—	
other	—	—	—	—	—	—	—	—	—	—	—	
Syphilitic diseases	—	—	—	—	—	—	—	—	—	—	—	
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	
Scarlet fever	—	—	—	—	—	—	—	—	—	—	—	
Whooping cough	—	2	—	1	3	1	—	—	—	1	4	
Measles	—	—	—	—	—	1	—	—	1	2	2	
Acute poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	
Meningococcal infections	—	1	—	2	3	1	1	—	—	2	5	
Acute infectious encephalitis	—	—	—	—	—	—	—	—	—	—	—	
Dysentery	—	—	—	—	—	—	—	—	—	—	—	
Other food poisoning	—	—	—	—	—	—	—	—	—	—	—	
Meningitis (not tubercular)	—	—	—	—	—	1	—	—	—	1	1	
Other diseases of nervous system	—	—	—	—	—	1	—	—	—	1	1	
Influenza	—	—	—	—	—	1	1	2	—	2	3	
Broncho pneumonia	—	13	12	10	43	5	3	—	—	8	51	
with immaturity	8	—	—	—	—	—	—	—	—	—	—	
with	—	—	—	—	—	1	—	—	—	1	1	
without	—	—	—	—	—	—	—	—	—	—	—	
with	2	1	1	—	8	1	—	—	—	1	9	
with	4	3	6	3	14	4	1	—	—	5	19	
without	2	1	2	1	4	—	—	—	—	—	—	
Bronchitis	—	—	—	—	—	—	—	—	—	—	—	
Other respiratory diseases	—	—	—	—	—	—	—	—	—	—	—	
Diarrhoea (4 weeks—2 years)	—	5	1	3	9	—	—	—	—	—	—	
Other diseases of digestive system	—	—	—	—	—	—	—	—	—	—	—	
Congenital malformations	—	5	1	1	9	—	—	—	—	—	—	
Birth injury with immaturity	—	32	7	3	53	—	—	—	—	—	—	
with	14	11	7	3	35	—	—	—	—	—	—	
without	18	—	—	—	18	—	—	—	—	—	—	
Atelectasis with immaturity	—	29	—	—	29	—	—	—	—	—	—	
with	25	—	—	—	25	—	—	—	—	—	—	
without	4	—	—	—	4	—	—	—	—	—	—	
Diarrhoea of newborn with immaturity	—	1	—	1	2	—	—	—	—	—	—	
with	—	—	—	—	—	—	—	—	—	—	—	
without	—	—	—	—	—	—	—	—	—	—	—	
Other sepsis of newborn with immaturity	—	—	—	—	—	—	—	—	—	—	—	
with	1	—	—	—	1	—	—	—	—	—	—	
without	1	—	—	—	1	—	—	—	—	—	—	
Other diseases of early infancy with immaturity	—	—	—	—	—	—	—	—	—	—	—	
with	15	—	2	—	17	—	—	—	—	—	—	
without	85	—	—	—	85	—	—	—	—	—	—	
Immaturity unqualified	—	—	—	—	—	—	—	—	—	—	—	
Suffocation (overlain)	—	—	—	—	—	—	—	—	—	—	—	
Other violence	—	2	—	—	2	—	—	—	—	—	—	
with	8	3	1	1	13	5	4	5	4	18	22	
without	—	—	—	—	—	—	—	—	—	—	—	
Other causes	—	4	—	3	7	—	—	—	—	—	—	

1871 - 1953



Causes of death in infancy and childhood.



MATERNAL MORTALITY 1931 - 1953

Mortality per 1000 live and stillbirths

5.0

MANCHESTER



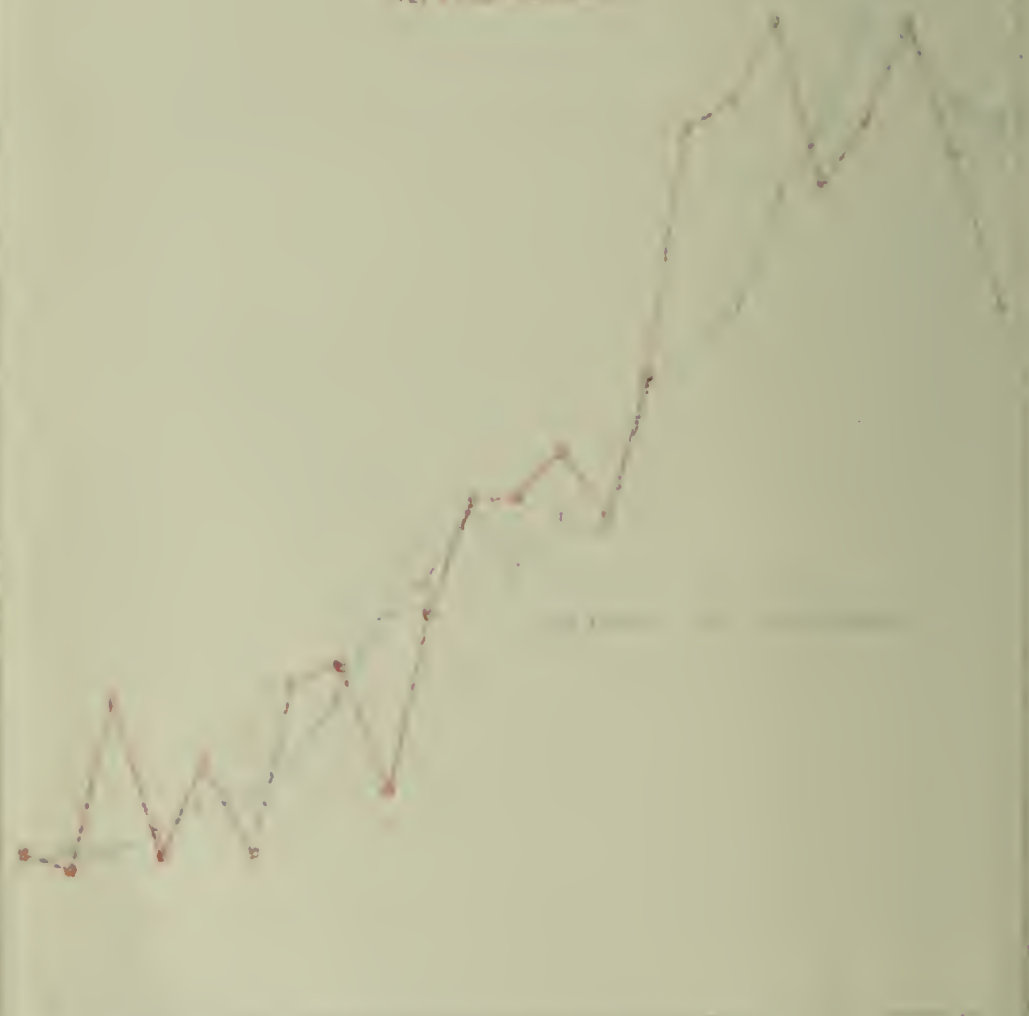
per
1000
live and
stillbirths

1931 1932 1933 1934 1935 1936 1937 1938 1939 1940 1941 1942 1943 1944 1945 1946 1947 1948 1949 1950 1951 1952 1953

WATERBURY MORTALITY 1928-1938

Annual Mortality Rates per 1,000 Live Births

WATERBURY



1928 1929 1930 1931 1932 1933 1934 1935 1936 1937 1938

DEATH RATE 1911-1915

1911-1915

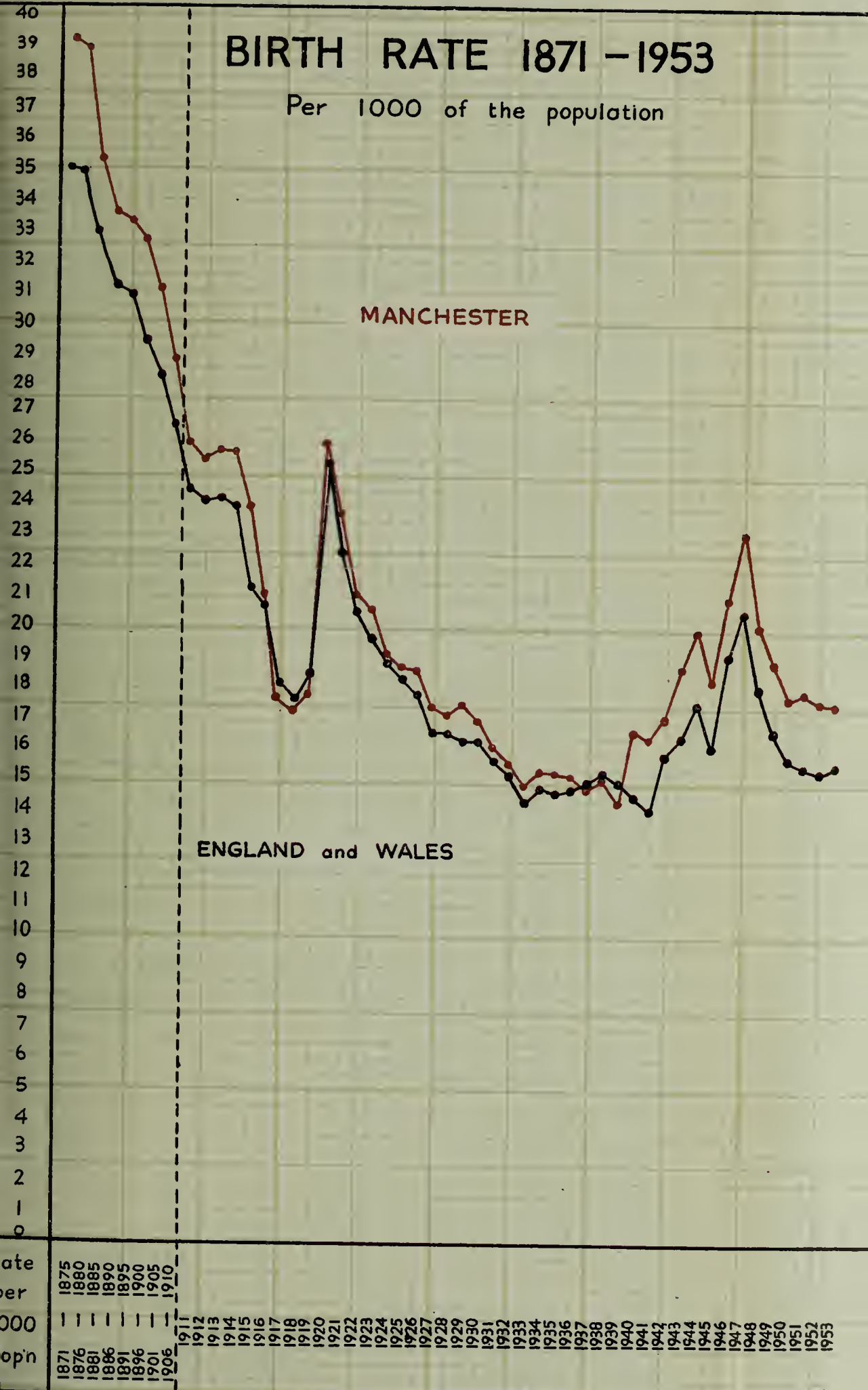
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BIRTH RATE 1871 - 1953

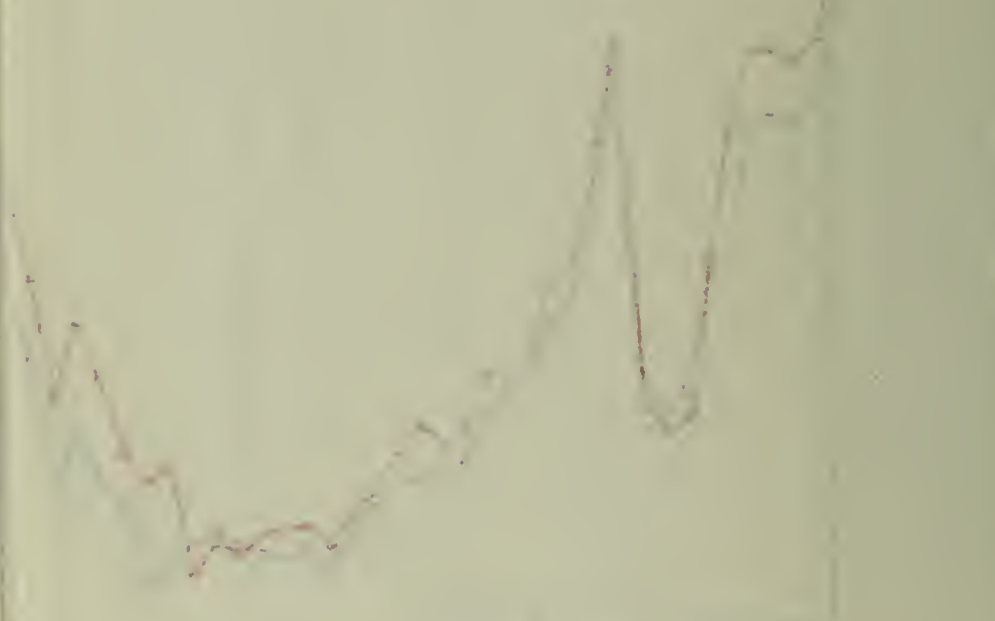
Per 1000 of the population



SMITH BARRETT 1913

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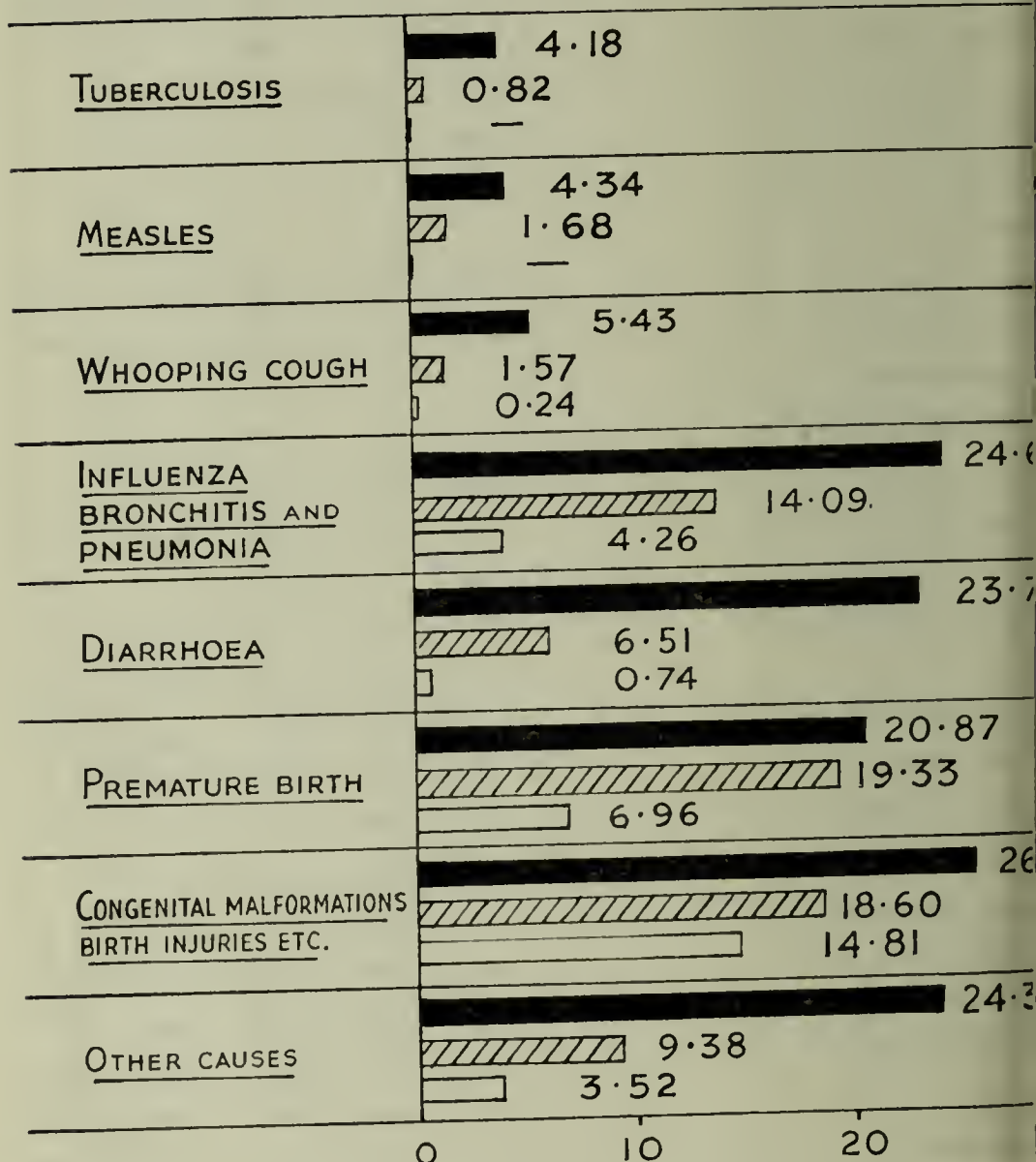
Infant mortality.

Deaths from various causes per 1,000 live births.

1949-53.

Cause of death	Rate per 1,000 live births				
	1949	1950	1951	1952	1953
Causes	38.24	37.87	35.29	34.28	30.53
Tuberculosis respiratory	0.08	..	0.16	..	..
" other	0.23	0.16	0.16	0.08	..
Septic diseases	0.08	0.08	..	0.16	..
Scarlet fever .. .. .	..	..	..	..	..
Diphtheria .. .. .	..	..	..	..	..
Whooping cough	1.45	1.13	0.16	0.40	0.24
Staphylococcal infections	0.30	0.16	0.08	..	0.24
Poliomyelitis .. .. .	..	..	..	..	..
infectious encephalitis .. .. .	..	..	..	..	..
Measles	0.08	0.40	0.08	0.08	..
Diseases of the nervous system	0.84	0.56	0.06	0.24	0.08
Dysentery	0.23	..	0.24	..	0.08
Pneumonia (over 4 weeks of age)	6.93	4.42	4.50	4.12	3.03
Erythema	0.91	1.13	1.29	0.81	1.15
Respiratory diseases	0.15	0.16	0.24	0.24	0.33
Local diseases	4.34	3.06	2.41	1.54	0.74
Digestive diseases	0.53	0.64	0.32	0.57	0.74
Hepatitis and nephrosis .. .. .	..	0.16	0.08	..	..
Congenital malformations	4.80	5.39	4.50	6.23	4.34
Injuries	3.43	3.46	3.78	3.48	3.60
Diseases of early infancy	5.48	7.96	8.60	7.36	6.87
Mortality, unqualified	5.33	6.51	4.82	6.95	6.96
Sudden	0.69	0.96	1.61	1.05	1.23
Other causes	2.36	1.53	1.30	0.97	0.90

INFANT MORTALITY



Deaths under one year of age from diarrhoea, congenital malformations, diseases of early infancy and other causes 1939-1953

Year	Diarrhoea		Congenital malformations		Injury at birth		Atelectasis		Others of early infancy		Immaturity unqualified		Other causes		Total Deaths	Infant mortality rate per 1,000 live births
	Deaths	Rate per 1,000 live births	Deaths	Rate per 1,000 live births	Deaths	Rate per 1,000 live births	Deaths	Rate per 1,000 live births	Deaths	Rate per 1,000 live births	Deaths	Rate per 1,000 live births	Deaths	Rate per 1,000 live births		
1939..	60	5.8	83	8.0	31	3.0	29	2.8	47	4.5	161	15.5	223	21.5	634	61.1
1940..	70	6.7	92	8.9	25	2.4	16	1.5	56	5.4	146	14.1	324	31.2	729	70.2
1941..	109	11.1	81	8.2	23	2.3	22	2.2	44	4.5	176	17.9	377	38.3	832	84.5
1942..	88	8.6	86	8.4	20	1.9	19	1.8	43	4.2	187	18.2	220	21.4	663	64.5
1943..	85	7.6	80	7.2	36	3.2	12	1.1	49	4.4	167	14.9	252	22.5	681	60.9
1944..	72	5.9	82	6.7	28	2.3	18	1.5	49	4.0	164	13.4	241	19.8	654	53.6
1945..	83	7.3	82	7.2	42	3.7	24	2.1	41	3.6	129	11.4	233	20.5	634	55.8
1946..	167	12.0	118	8.4	40	2.9	47	3.4	38	2.7	193	13.8	287	20.5	890	63.7
1947..	223	14.1	90	5.7	37	2.3	57	3.6	49	3.1	181	11.4	309	19.6	946	59.8
1948..	57	4.1	72	5.2	45	3.3	49	3.6	22	1.6	104	7.5	232	16.8	581	42.1
1949..	57	4.3	63	4.8	45	3.4	47	3.6	25	1.9	70	5.3	195	14.9	502	38.2
1950..	38	3.0	67	5.4	43	3.5	58	4.7	41	3.3	81	6.5	143	11.5	471	37.9
1951..	30	2.4	56	4.5	47	3.8	73	5.9	34	2.7	60	4.8	139	11.2	439	35.3
1952..	19	1.5	77	6.2	43	3.5	65	5.3	26	2.1	86	7.0	108	8.7	424	34.3
1953..	9	0.7	53	4.3	44	3.6	51	4.2	33	2.7	85	7.0	98	8.0	373	30.5

Legitimate and illegitimate live births and deaths of infants under one year of age.
From Registrar-Generals returns.

Year	LIVE BIRTHS			Illegitimate percentage of total live births England & Wales	Rate per 1,000 related live births								
	Legitimate	Illegitimate	Total		Illegitimate percentage of total live births	Number		Legitimate		England and Wales			
						Legitimate	Illegitimate	Total	Legitimate	Illegitimate	Total		
1914	17,972	807	18,779	4.30	2,218	205	2,423	123.41	254.03	129.03	100.1	206.6	104.6
1915	15,956	740	16,696	4.43	1,959	182	2,141	122.78	245.95	178.24	105.4	208.3	109.7
1916	14,901	696	15,597	4.46	1,578	182	1,760	128.40	228.45	111.37	86.6	183.8	91.2
1917	12,195	742	12,937	5.74	1,438	176	1,614	103.48	237.20	111.15	90.3	201.1	96.5
1918	12,053	873	12,926	6.75	1,262	180	1,442	100.00	206.19	106.83	91.3	185.6	97.2
1919	12,758	928	13,686	6.78	1,201	180	1,381	172.41	206.19	106.83	83.7	172.8	89.1
1920	18,253	960	19,213	4.99	1,175	160	1,335	64.04	221.88	97.95	76.2	156.3	79.9
1921	16,647	902	17,549	5.14	1,542	213	1,755	189.38	189.38	97.61	79.2	158.3	82.8
1922	15,013	774	15,787	4.38	1,375	150	1,525	91.59	193.80	96.60	74.2	138.7	77.0
1923	14,677	711	15,388	4.62	1,243	117	1,360	84.69	164.56	88.35	66.6	131.8	69.4
1924	13,876	657	14,533	4.54	1,316	138	1,454	95.18	164.56	88.35	72.6	133.0	75.1
1925	13,493	669	14,162	4.72	1,251	113	1,364	92.72	168.91	96.31	72.5	135.6	70.2
1926	13,290	679	13,969	4.86	1,116	100	1,216	83.97	147.28	87.05	67.6	129.6	69.7
1927	12,388	648	13,036	4.97	1,084	95	1,179	88.44	147.06	86.07	67.4	114.8	65.1
1928	12,256	646	12,902	5.01	1,144	128	1,272	92.41	188.79	97.41	71.9	125.9	74.4
1929	12,380	678	13,058	5.19	1,144	114	1,258	72.34	169.39	77.43	57.8	104.7	60.0
1930	12,178	673	12,851	5.24	881	93	974	81.75	144.64	85.03	64.3	110.7	66.3
1931	11,694	643	12,337	5.21	956	81	1,037	83.35	130.86	85.83	62.9	112.2	65.0
1932	11,206	619	11,825	5.24	934	81	1,015	72.67	113.24	74.76	61.7	107.5	63.7
1933	10,582	574	11,156	5.15	769	66	835	67.61	96.39	69.06	56.9	95.4	58.6
1934	10,974	581	11,555	5.03	742	56	798	69.82	96.83	71.09	55.5	89.5	56.9
1935	10,842	537	11,379	4.72	757	52	809	76.40	85.45	76.84	57.3	88.0	58.5
1936	10,681	550	11,231	4.90	816	47	863	74.99	102.32	69.03	51.4	80.8	57.6
1937	10,268	518	10,786	4.80	770	53	823	67.06	105.92	61.09	48.6	82.4	50.4
1938	10,468	557	11,025	5.05	587	47	634	83.31	82.31	61.09	55.6	82.3	55.8
1939	9,807	515	10,322	5.50	677	52	729	68.57	100.97	70.18	58.8	82.3	58.8
1940	9,873	515	10,388	4.96	677	65	742	83.02	106.56	84.47	58.8	82.3	58.8
1941	9,239	610	9,849	6.19	767	65	832	64.15	70.47	64.52	49.2	75.0	49.3
1942	9,680	596	10,276	5.80	621	42	663	64.15	74.27	60.88	47.6	71.4	49.0
1943	10,431	754	11,185	6.74	625	56	681	59.92	79.79	53.59	43.7	68.5	44.5
1944	11,239	965	12,204	7.91	577	77	654	51.34	79.79	55.80	44.1	64.8	47.0
1945	11,362	1,187	12,549	10.45	557	72	629	54.74	64.87	55.80	44.1	60.1	40.9
1946	12,874	1,095	13,969	7.84	788	92	880	61.99	84.02	63.71	41.6	58.0	41.8
1947	14,760	1,070	15,830	6.76	859	87	946	58.20	81.31	59.76	40.4	58.0	44.8
1948	12,886	908	13,794	6.58	524	57	581	40.66	62.77	42.12	33.3	45.3	34.5
1949	12,243	886	13,129	6.75	461	41	502	46.28	46.28	38.74	31.7	44.8	32.7
1950	11,523	813	12,336	7.34	433	38	471	37.58	41.62	37.87	29.1	39.4	29.8
1951	11,616	822	12,438	5.06	407	32	439	35.03	38.93	35.29	29.2	38.5	29.6
1952	11,549	818	12,367	6.61	398	26	424	34.46	31.78	34.28	27.2	34.9	27.6
1953	11,450	769	12,218	6.29	352	21	373	30.74	27.34	30.53	27.2	34.9	26.8

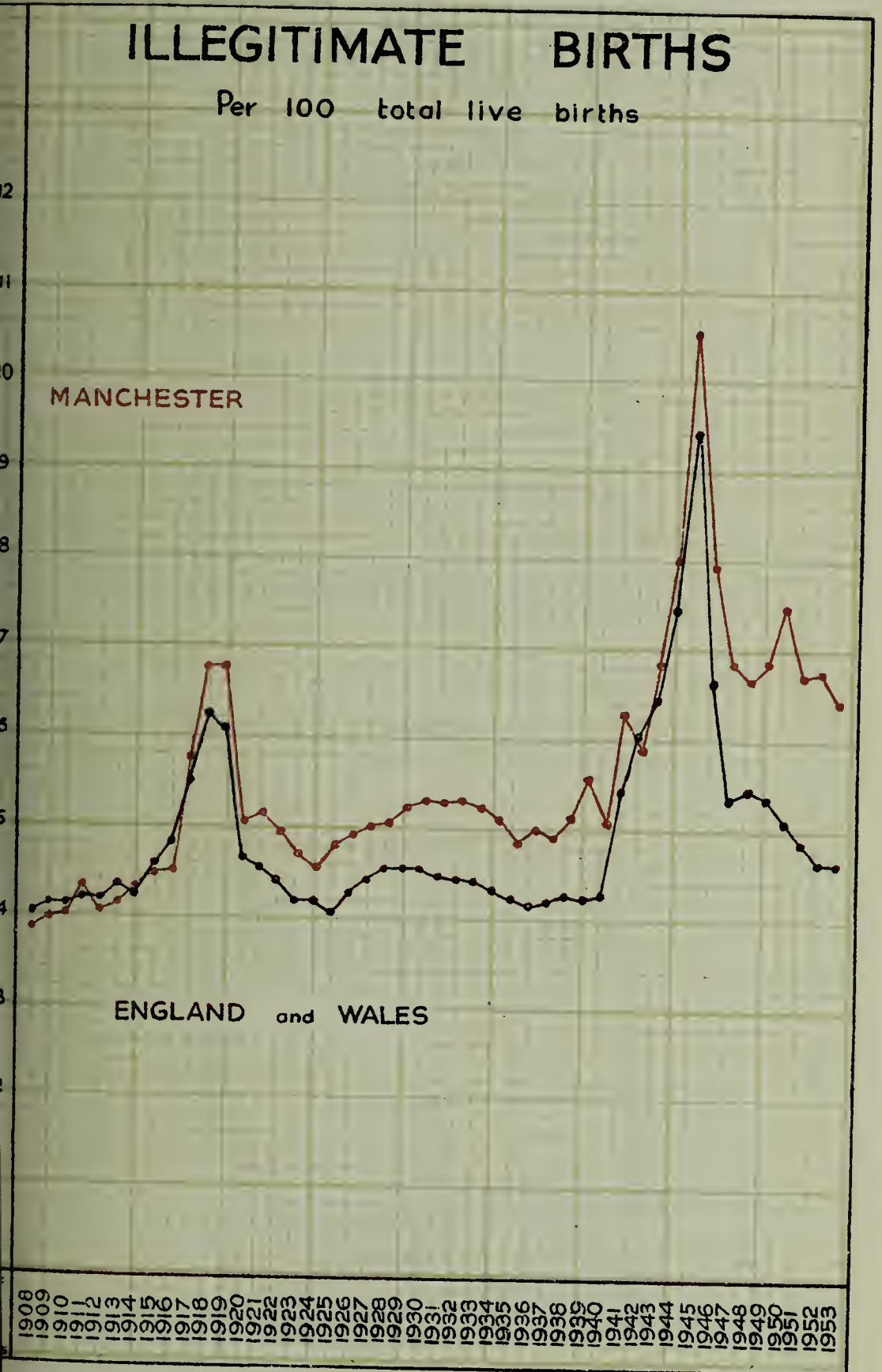
ILLEGITIMATE BIRTHS

Per 100 total live births

MANCHESTER

ENGLAND and WALES

1908
1909
1910
1911
1912
1913
1914
1915
1916
1917
1918
1919
1920
1921
1922
1923
1924
1925
1926
1927
1928
1929
1930
1931
1932
1933
1934
1935
1936
1937
1938
1939
1940
1941
1942
1943
1944
1945
1946
1947
1948
1949
1950
1951
1952
1953



WARDS	LIVE BIRTHS				DEATHS UNDER 1 YEAR OF AGE					
	Total	Legitimate	Illegitimate	% Illegitimate to total live births	Total	Legitimate	Illegitimate	Rate per 1000 live births	Rate per 1000 live births legitimate	Rate per 1000 live births illegitimate
CITY OF MANCHESTER ..	12218	11450	768	6.29	373	352	21	30.53	30.74	27.34
Alexandra Park ..	218	206	12	5.50	5	5	—	22.94	24.27	—
All Saints ..	509	445	64	12.57	18	14	4	35.36	31.46	62.50
Ardwick ..	455	424	31	6.81	12	12	—	26.37	28.30	—
Barlow Moor ..	180	171	9	5.00	2	2	—	11.11	11.70	—
Beswick ..	371	359	12	3.23	9	8	1	24.26	22.28	83.33
Blackley ..	366	353	13	3.55	18	17	1	49.18	48.16	76.92
Bradford ..	429	411	18	4.20	14	13	1	32.63	31.63	55.55
Burnage ..	208	199	9	4.33	4	2	2	19.23	10.05	222.22
Cheetham ..	233	219	14	6.01	12	12	—	51.50	54.79	—
Chorlton-cum-Hardy ..	167	151	16	9.58	8	8	—	47.90	52.98	—
Collegiate Church ..	276	240	36	13.04	8	7	1	28.99	29.17	27.78
Crumpsall ..	282	265	17	6.03	6	6	—	22.64	22.64	—
Didsbury ..	218	210	8	3.67	3	3	—	13.76	14.29	—
Gorton North ..	360	342	18	5.00	17	17	—	47.22	49.71	—
Gorton South ..	274	265	9	3.28	11	11	—	40.15	41.51	—
Harpurhey ..	349	328	21	6.02	8	8	—	22.92	24.39	—
Levenshulme ..	239	226	13	5.44	3	3	—	12.55	13.27	—
Lightbowne ..	275	265	10	3.64	5	5	—	18.18	18.87	—
Longsight ..	235	218	17	7.23	9	9	—	38.30	41.28	—
Moss Platting ..	293	284	9	3.07	12	12	—	40.96	42.25	—
Moss Side East ..	471	401	70	14.86	17	14	3	36.09	34.91	42.86
Moss Side West ..	387	356	31	8.01	11	8	3	28.42	22.47	96.77
Moston ..	297	291	6	2.02	8	8	—	26.94	27.49	—
New Cross ..	327	306	21	6.42	6	6	—	18.35	19.61	—
Newton Heath ..	285	275	10	3.51	6	5	1	21.05	18.18	100.00
Newtown ..	489	464	25	5.11	26	25	1	53.17	53.88	40.00
Northenden ..	416	399	17	4.09	18	16	2	43.27	40.10	117.65
Old Moat ..	201	195	6	2.98	4	4	—	19.90	20.51	—
Openshaw ..	345	332	13	3.77	9	9	—	26.09	27.11	—
Rusholme ..	218	207	11	5.04	4	4	—	18.35	19.32	—
St. George's ..	453	409	44	9.71	14	13	1	30.91	31.78	—
St. Luke's ..	427	367	60	14.05	13	13	—	30.44	35.42	—
St. Mark's ..	356	335	21	5.90	6	6	—	16.85	17.91	—
St. Peter's ..	181	155	26	14.36	7	7	—	38.67	45.16	—
Withington ..	196	186	10	5.10	5	5	—	25.51	26.88	—
Wythenshawe ..	1232	1191	41	3.33	35	35	—	28.41	29.39	—

Stillbirths, neo-natal deaths, deaths at four weeks to one year of age, and infant death rate, 1934-1953.

Year	STILLBIRTHS		NEO-NATAL DEATHS		DEATHS, 4 WEEKS— 1 YEAR		DEATHS UNDER 1 YEAR AND STILLBIRTHS		Infant death rate per 1,000 live births
	Number of stillbirths	Rate per 1,000 live and stillbirths	Number of neo-natal deaths, 0-4 weeks	Rate per 1,000 total live births	Number of deaths, 4 weeks- 1 year	Rate per 1,000 total live births	Number of deaths under 1 year and stillbirths	Rate per 1,000 total live and stillbirths	
1934 ..	535	44.25	390	33.75	408	35.31	1,333	110.26	69.06
1935 ..	546	45.79	381	33.48	428	37.61	1,355	113.63	71.09
1936 ..	531	45.15	385	34.28	478	42.56	1,394	118.52	76.84
1937 ..	468	41.59	381	35.32	442	40.98	1,291	114.71	76.30
1938 ..	507	43.96	351	31.84	410	37.19	1,268	109.95	69.03
1939 ..	492	45.26	321	30.93	313	30.16	1,126	103.59	61.09
1940 ..	478	43.99	295	28.40	434	41.78	1,207	111.08	70.18
1941 ..	400	39.03	292	29.65	540	54.82	1,232	120.21	84.47
1942 ..	443	41.33	304	29.58	359	34.94	1,106	103.18	64.52
1943 ..	406	35.02	306	27.36	375	33.52	1,087	93.77	60.88
1944 ..	367	29.19	315	25.81	339	27.78	1,021	81.22	53.59
1945 ..	372	31.70	311	27.37	323	28.43	1,006	85.73	55.80
1946 ..	445	30.87	474	33.93	416	29.78	1,335	92.62	63.71
1947 ..	427	26.27	466	29.44	480	30.32	1,380	84.89	59.76
1948 ..	376	26.53	274	19.85	307	22.26	957	67.54	42.12
1949 ..	331	24.59	242	18.43	260	19.80	833	61.88	38.24
1950 ..	333	26.08	263	21.15	208	16.72	804	62.96	37.87
1951 ..	319	25.01	251	20.18	188	15.11	758	59.42	35.29
1952 ..	349	27.45	269	21.75	155	12.53	773	60.78	34.28
1953 ..	355	28.24	255	20.87	118	9.66	728	57.90	30.53

PUERPER
AND
POST ABORER
SEPSIS

er s	Rate per 100 births	Rate per 100
	1.38	0.2
	1.86	0.1
	1.35	0.0
	1.24	0.0
	1.16	0.0
	2.41	0.0
	2.34	0.0
	1.94	0.0
	1.96	0.0
	1.30	0.0
	2.14	0.0
	1.84	0.0
	2.15	0.0
	2.07	0.0
	2.09	0.0
	1.84	0.0
	2.52	0.0
	†1.39	0.0
	1.61	0.0
	1.70	0.0
	1.32	0.0
	1.93	0.0
	1.36	0.0
	1.16	0.0
	1.47	0.0
	0.73	0.0
	0.83	0.0
	0.97	0.0
	0.65	0.0
	1.04	0.0
	0.64	0.0
	0.25	0.0
	0.35	0.0
	0.55	0.0
	0.07	0.0
	0.45	0.0
	0.08	0.0
	0.39	0.0
	0.10	0.0
	—	—

DIARRH
(under 2

Deaths	pc I
523	0
479	0
305	0
282	0
139	0
162	0
237	0
375	0
190	0
209	0
186	0
213	0
258	0
181	0
240	0
240	0
166	0
172	0
125	0
102	0
113	0
74	0
57	0
64	0
75	0
62	0
75	0
113	0
93	0
88	0
73	0
85	0
169	0
229	0
58	0
60	0
38	0
30	0
22	0
9	0

INFECTIOUS DISEASES AND EPIDEMIOLOGY.

The following figures indicate the causes of deaths from the more common diseases :—

	Years	
	1948-52 Average	1953
Measles	8	2
Whooping cough	15	4
Scarlet fever	—	—
Diphtheria	1	1
Influenza	93	102
Pneumonia (all forms)	365	338
Typhoid fever	—	—
Shigellosis	42	38
Pulmonary tuberculosis	379	198

consultations.
 55 consultation visits were made during the year by medical officers of the Department at the request of medical practitioners in the City in connection with the diagnosis of cases of infectious disease in which the nature of the disease was in doubt.

Smallpox.

No case of smallpox occurred in Manchester during the year.

Measures against smallpox.

The cases of variola minor which occurred in some of the surrounding districts of the city during the early part of the year had a considerable effect on the Department's activities, and included the daily surveillance of contacts in Manchester and the increase in requests by general practitioners for their opinion on cases occurring in their practice where there was an element of doubt. One such case, a man aged 50 years, was removed to hospital for observation from one of the more thickly populated districts of the city, but was eventually considered not to be a case of smallpox. Nevertheless, every possible precaution was taken at the time. Increased demands for vaccination or re-vaccination were experienced, and to assist private practitioners, a medical officer of the staff made house-to-house visits in the city concerned and vaccinated any contacts whose working hours made it impracticable for them to attend their doctor during surgery hours.

In the case of a smallpox contact, a middle aged man resident in Halifax, developed suspicious symptoms and in consequence was removed to hospital in Halifax. After a few days observation the diagnosis was not confirmed. In the meantime, as the patient had visited a speedway stadium in Manchester the day previous to his removal, special vaccination sessions were held at the stadium and in the quarters for the convenience of some 75 members of the staff who were unable to visit their own doctors owing to the irregularity of their working hours. General practitioners in the city were immediately circularised of the details of the case and at the same time, reminded to be prepared for the possibility of an increase in the number of requests for vaccination.

Vaccination.

The number of infant vaccinations which, for the five years prior to 1953 averaged 59.49 per cent of births and fell to 35.19 per cent at the end of 1952, took an upward trend in 1953 when the number of children under 1 year of age successfully vaccinated was 5,827, a percentage of 47.69 to the number of live births. This figure is the highest since 1947 and may be attributed in some extent, to the introduction, in the early part of the year, of special live vaccination sessions for mothers and infants at child welfare clinics.

Infant vaccination record forms received in the year from general practitioners, and since the latter end of April, 1953, from clinics, were as follows:—

General practitioners.		Child welfare clinics.	
Primary	3,285	Primary	2,275
Insusceptible	188	Insusceptible	146
Total	<u>3,473</u>	Total	<u>2,421</u>

The numbers of children successfully vaccinated in each of the 10 years, with percentages, are as follows:—

Year	Numbers of persons vaccinated					Numbers of live births	Percentage vaccinated under 1 year to live births
	under 1 year	1—4 years	5—14 years	15 years and over	Totals		
1944 ..	7,668		172		7,840	12,204	62.8
1945 ..	7,300		114		7,414	11,362	64.2
1946 ..	8,994		362		9,356	13,969	64.3
1947 ..	9,856		302		10,158	15,830	62.2
1948 ..	4,916		173		5,089	13,794	35.6
1949 ..	2,957	2,031	70	383	5,441	13,129	22.5
1950 ..	5,409	2,668	846	685	9,608	12,436	43.4
1951 ..	4,803	587	311	1,937	7,638	12,438	38.6
1952 ..	4,419	599	382	2,106	7,506	12,367	35.7
1953 ..	5,827	1,227	1,328	3,776	12,158	12,218	47.6

NOTE.—Percentages vaccinated under 1 year to live births for the years 1944 to 1948 were expressed in previous reports, as percentages of the uncorrected live births.

Diphtheria.

40 patients were admitted to the isolation hospital with a preliminary diagnosis of diphtheria and of this number 5 cases were subsequently confirmed. In addition, there were two further cases, a girl aged 6½ years considered by the doctor to be a very mild diphtheria and nursed at home, and a woman aged 45 years who died on the day of her admission to one of the general hospitals. This total of 7 cases of diphtheria equals that for the year 1952, the lowest recorded in the City. One case, a girl aged 11½ years, had received a course of P.T.A.P. immunization in the latter part of 1950.

The

FO population

75
84
899
236
480
594
945
177
284
30
379
24
292
94
493
744
492
304
755
313
390
332
164
44
06
72
07
77
24
07
35
58
39
28
95
81

Pneumonia			Smallpox	Malaria (contracted in England & Wales)	Ophthalmia neonatorum	Pemphigus neonatorum	Puerperal pyrexia	Total cases	Rates per 1,000 population in wards
Broncho	Influenzal	Other							
116	71	69	—	—	55	4	670	12365	17.62
1	1	—	—	—	3	—	9	169	7.77
9	1	—	—	—	7	—	51	352	18.68
1	—	—	—	—	3	—	27	333	18.60
3	1	1	—	—	2	—	8	153	10.04
1	—	1	—	—	—	—	8	185	9.50
—	1	—	—	—	—	1	8	386	18.74
—	—	—	—	—	—	—	14	344	14.99
—	—	—	—	—	1	—	11	210	9.47
1	1	2	—	—	—	1	9	165	11.55
1	1	—	—	—	7	—	2	189	9.44
—	—	13	—	—	1	—	11	304	21.90
—	1	2	—	—	—	1	8	397	18.03
—	—	—	—	—	1	—	4	160	9.25
5	6	7	—	—	3	—	10	501	21.79
2	3	—	—	—	1	—	7	245	14.00
1	—	—	—	—	—	—	4	375	20.01
—	—	—	—	—	—	—	10	171	8.77
1	—	—	—	—	—	—	4	427	21.03
2	—	1	—	—	1	—	17	170	10.79
5	—	2	—	—	1	—	6	339	22.89
2	—	—	—	—	3	—	39	344	17.74
3	1	—	—	—	4	—	23	249	13.44
—	1	1	—	—	—	1	6	461	22.53
10	1	1	—	—	1	—	17	338	23.40
13	11	2	—	—	—	—	9	456	23.87
7	—	7	—	—	—	—	16	603	30.81
7	8	4	—	—	3	—	12	571	24.29
3	1	—	—	—	3	—	7	298	17.45
2	13	4	—	—	—	—	8	419	18.36
3	—	—	—	—	1	—	6	154	8.95
5	—	1	—	—	1	—	35	303	15.67
3	—	—	—	—	3	—	42	281	15.39
—	2	—	—	—	1	—	24	353	16.47
7	1	2	—	—	2	—	11	155	13.22
1	—	3	—	—	1	—	8	184	12.03
6	2	5	—	—	1	—	43	1433	30.12
3	12	9	—	—	—	—	136	188	—

FO

	Totals											
	Under 1		1-		2-		5-		15-		Totals	
	P	S	P	S	P	S	P	S	P	S	P	S
January	432	408	27	26	25	25	15	15	61	59	560	533
February	318	304	15	15	23	23	18	16	68	63	442	421
March	444	410	27	27	58	53	51	50	278	273	858	813
April	894	811	151	140	252	245	811	653	1023	978	3,131	2,827
May	540	508	70	69	78	77	130	126	180	169	998	949
June	549	535	49	47	49	46	28	27	71	68	746	723
July	569	551	35	35	40	40	15	14	31	30	690	670
August	442	422	41	41	32	32	24	24	41	39	583	558
September	605	575	35	33	35	35	5	4	49	46	729	693
October	597	558	44	43	41	41	10	10	33	29	725	681
November.. .. .	514	495	32	32	47	44	10	9	44	42	647	622
December	263	249	14	14	9	9	5	5	21	18	312	295
	5,167	5,826	543	522	689	670	1,122	953	1,900	1,814	10,421	9,785

	Totals											
	Under 1		1-		2-		5-		15-		Totals	
	P	S	P	S	P	S	P	S	P	S	P	S
January	—	—	—	—	2	2	7	7	60	59	69	68
February	—	—	—	—	2	2	1	1	38	36	41	39
March	—	—	—	—	4	4	13	13	582	532	599	549
April	—	—	1	1	12	12	250	245	875	831	1138	1089
May	—	—	1	1	7	5	77	65	169	157	254	228
June	1	1	—	—	1	1	9	9	85	79	96	90
July	—	—	—	—	2	2	14	12	89	84	105	98
August	—	—	—	—	—	—	4	4	33	32	37	36
September	—	—	—	—	2	2	10	10	49	47	61	59
October	—	—	—	—	2	1	6	6	48	46	56	53
November.. .. .	—	—	—	—	—	—	2	2	45	43	47	45
December	—	—	—	—	2	2	1	1	16	16	19	19
	1	1	2	2	36	33	394	375	2,89	1962	2522	2373

The following figures show the number of cases notified and accepted as diphtheria each year for the last 10 years :—

Year	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953
Cases	266	302	259	80	43	22	22	10	7	7

... mortality.
 The case mortality in 1953 was 14.29 per cent., as compared with an average of 14.4 for the last 5 years. Manchester case mortality rates per cent. in age groups have been as follows :—

	0-5 years	5-10 years	10-15 years	15 years and over
1950	33.5	17.8	6.0	4.5
1953	2.4	3.8	1.6	2.5
Percentage reduction	93	79	73	44

“carriers” and the virulence test.

Of the total number of formal notifications received it was found, on investigation, that 36 related to persons who were merely “carriers” of diphtheria.

9 swabs were taken from the throats and noses of all members of families where positive results had been obtained from the patients ; all proved negative.

... of anti-toxin.

Under the National Health Service Acts, the responsibility for the provision of diphtheria anti-toxin for use by general practitioners, when required, has been taken over by the Manchester Regional Hospital Board. Arrangements have been made for supplies of anti-toxin to be available at certain hospitals and fire stations in the City.

... diphtheria immunization.

The Department's basic scheme for the immunization of the child against diphtheria continued to operate as in former years and a high level of immunized children was maintained. Immunization is recommended when a child is eight months old and the health visitor gives advice to parents in this matter during the early months of the child's life and secures if possible, consent for immunization of the child ; suitable descriptive literature is left with the parents in which is indicated places where children can receive protection. To supplement this valuable personal approach, “First Birthday Cards” are sent reminding parents of the importance of immunization at this stage. At the commencement of school life a further attempt is made by the teaching and health staffs to secure the protection of non-immunized children at school. “Booster” or reinforcing injections are given normally when the immunized child attends school at the age of 5 years and again at the age of 7 years.

In addition to the facilities provided at child welfare centres, day nurseries and clinics in the Health Department, the mobile immunization unit, which has been in operation for the past eight years, continued its good service in all areas of the City. Use of the unit resulted in the complete immunization of 3,393, or 92 per cent. of the total number of children immunized in the City during the year.

11,266 Manchester persons received a complete course of diphtheria injections ; 465 others received an incomplete course and 10,898 were given a reinforcing injection. In addition, 147 non-Manchester residents received a complete course, and 280 a reinforcing injection. The numbers are distributed as follows :—

Number of Manchester persons immunized and number of immunizations effected

	Numbers having received complete course of antigen	Numbers having received incomplete course of antigen	Numbers having received reinforcing course of antigen
Schools and school clinics ..	2,521	214	9,000
Child welfare centres	3,234	119	7,000
Day nurseries	276	8	1,000
Hospitals	445	29	
Health Office	7	—	
Mobile unit	3,393	75	1,000
General practitioners	1,315	20	2,000
Manchester persons immunized by outside authorities ..	73	—	
Persons from outside authorities immunized in Manchester	147	—	2,000
Total Manchester persons immunized	11,266	465	10,898
Total immunizations effected in Manchester	11,340	465	11,191

8,755 children under five years of age and 2,436 children of school age (total of 11,191 children) completed a full course of immunization. At the close of the year, 79.24 per cent of Manchester children had been immunized, the percentages in age groups being 64.64 in the group 0-4 years and 87.24 in the group 5-14 years.

Antigens used in immunizing Manchester pre-school and school children

Age group	Numbers having received complete course of injections	Antigens used		
		A.P.T.	T.A.F.	P.T.
Under 1 year	3,103	3,011	—	
1-4 years	5,647	5,613	—	
5-14 years	2,436	2,421	9	
Totals—under 15 years ..	11,191	11,045	9	1,191

Although Schick testing is not practised as a routine in connection with the greater part of the scheme, such tests were carried out largely among hospital patients and staff. The number of primary tests performed during the year on persons not previously immunized was 121, of which 12 gave a positive result and 109 were negative. 482 posterior tests were carried out on persons previously immunized of which 59 gave positive and 423 negative results.

The following table illustrates the progress of the immunization scheme since its inception :—

Numbers of Manchester persons, in age groups, having had a complete course of injections.

	1928 to															Total 10-15 years.		Total 5-10 years.		Total under 5 years at end of 1953.	
	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953		
Under 1 year	3489	822	1071	915	740	503	1497	1761	2298	1767	2383	2540	3349	4582	4678	3863	3281	3411	3108		
1 year	4543	1328	1169	1228	965	912	1882	2411	3557	2927	4379	4202	3444	4747	3994	3222	4133	3931	3848		
2 years	3714	863	890	894	576	409	1295	1292	1567	342	1258	1517	574	1139	1134	837	842	1093	940		
3 "	3702	782	901	824	476	272	1065	1140	1504	168	554	1045	280	369	439	405	462	541	461		
4 "	3844	801	906	856	475	238	1057	920	1710	146	342	600	202	220	189	207	420	466	398		
5 "	4312	702	951	866	464	192	1226	473	1747	182	264	333	100	132	116	170	444	603	583		
6 "	4341	772	972	878	447	222	1241	379	2165	199	233	269	77	91	74	171	483	381	467		
7 "	4235	751	890	832	382	195	1215	236	1577	206	139	215	52	68	58	171	515	310	225		
8 "	4291	810	857	711	408	179	1137	176	931	106	101	189	43	63	33	141	640	337	199		
9 "	4099	804	678	583	336	162	1036	112	805	98	68	143	36	54	31	159	584	363	164		
10 "	3550	923	698	613	308	137	1050	117	864	97	87	86	28	37	23	216	749	380	198		
11 "	2858	703	459	444	274	86	933	121	595	72	71	89	15	27	16	165	645	354	149		
12 "	2180	772	419	395	218	43	1038	131	465	32	67	61	22	18	7	186	702	426	160		
13 "	1739	615	424	396	259	39	502	100	436	33	50	36	11	15	5	145	747	398	166		
14 "	603	96	117	79	49	11	219	53	51	12	14	17	6	11	5	126	567	260	125		
15 years and over ..	1895	917	444	240	102	105	309	221	298	139	210	155	112	108	47	60	155	68	75		
Totals 1928-53	53425	12461	11846	10754	6479	3705	16702	9643	20570	6525	10220	11497	8351	11681	10849	10244	15369	13322	11266	254909	

The totals at the end of 1953 indicate only approximately the immune population since no account is taken of any deaths that may have ensued amongst the immunized children.

Meningococcal infection.

38 notifications were received. Of this number 14 were from general practitioners and these cases were removed to the isolation hospital; they were confirmed subsequently. 24 cases were notified from and treated in various hospitals in the City, thus making a total of 33 confirmed cases of meningococcal infection.

There were 6 deaths from the disease, giving a case mortality rate of 18 per cent., as compared with a rate of 8.7 per cent. in 1952.

As regards seasonal prevalence, it will be seen from the following table that approximately 70 per cent. of the cases occurred in the first six months of the year, also that twice as many females as males were affected.

Cases of meningococcal infection in quarters of the year, age groups and sexes.

	1st quarter		2nd quarter		3rd quarter		4th quarter		Total
	M	F	M	F	M	F	M	F	
Under 5 years	3	6	3	6	2	3	—	3	8
5—9	—	1	1	1	—	—	—	—	1
10—14	—	—	—	—	—	—	—	—	—
15—19	—	—	—	—	—	—	—	—	—
20—24	—	—	—	—	—	—	—	—	—
25—34	—	—	—	—	—	—	—	—	—
35 and over	—	1	1	—	1	1	—	—	2
All ages	3	8	5	7	3	4	—	3	11

Poliomyelitis.

The number of cases of acute poliomyelitis was considerably less than in previous years. Of the 37 cases notified 7 were confirmed as paralytic poliomyelitis and 4 non-paralytic, with no deaths. As will be seen from the following table, the disease showed its usual seasonal incidence in the months of July, August and September, when 55 per cent. of the total cases occurred, compared with 51 per cent. in the corresponding period of 1952.

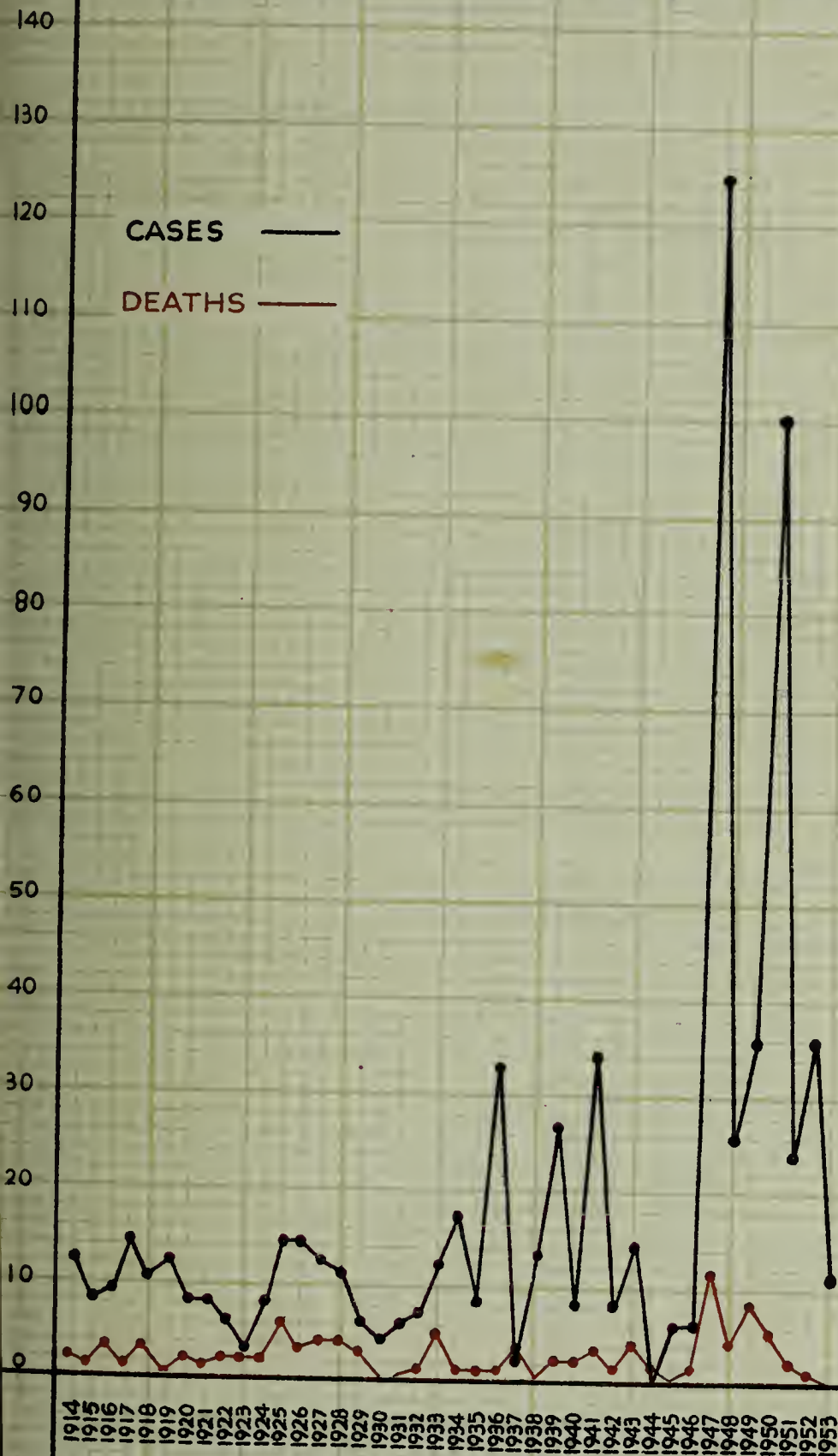
Months of onset of confirmed cases :—

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.
Paralytic	—	—	—	—	—	1	2	2	1	1	—
Non-paralytic ..	—	—	—	—	2	1	1	—	—	—	—

The sex and age distributions of the cases were as follows :—

		-1	1-2	3-4	5-9	10-14	15-24	25-
Paralytic	{ Male	—	1	—	1	—	1	1
	{ Female	—	1	1	—	—	—	1
Non-paralytic	{ Male	—	—	1	—	1	1	1
	{ Female	—	—	—	—	—	—	—
Total	{ Male	—	1	1	1	1	2	2
	{ Female	—	1	1	—	—	—	1

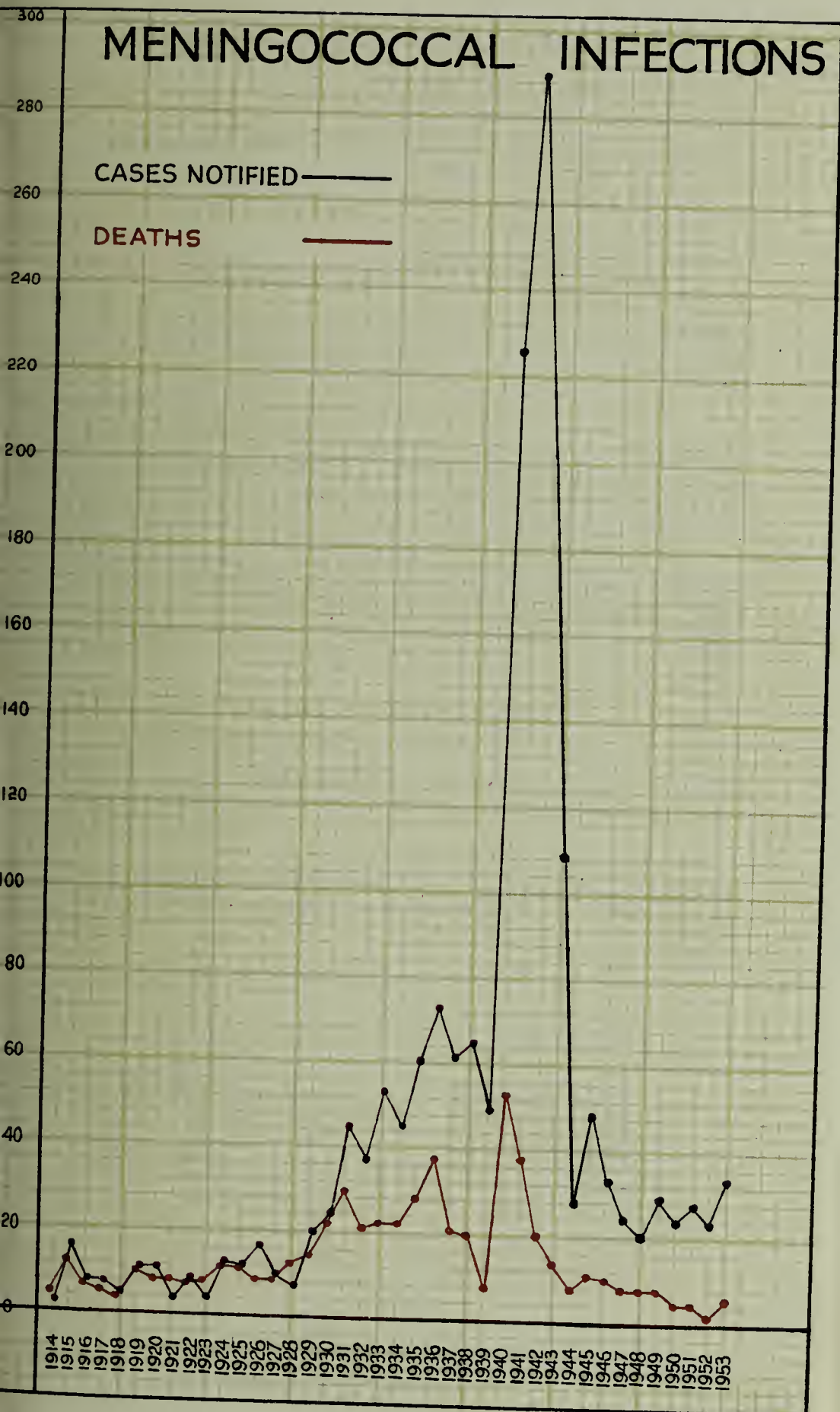
ACUTE POLIOMYELITIS



MENINGOCOCCAL INFECTIONS

CASES NOTIFIED —

DEATHS —



The following table shows the incidence of poliomyelitis and deaths during past five years :—

Age groups	Cases															Deaths																				
	1953			1952			1951			1950			1949			1953			1952			1951			1950			1949								
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T			
year	-	-	-	2	2	-	1	1	5	-	5	3	-	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
rs	1	1	2	4	5	9	2	1	3	14	10	24	8	4	12	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-	1	-	1	-	-	-
rs	1	1	2	1	6	7	1	7	8	7	6	13	2	3	5	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	1	2	3	-	-	-
s	1	-	1	6	3	9	2	2	4	13	12	25	2	3	5	-	-	-	1	-	1	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-
ars	1	-	1	1	-	1	-	1	1	7	5	12	3	-	3	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-
ars	2	-	2	3	1	4	5	-	5	5	6	11	1	2	3	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	1	1	1	2	-	-
er	2	1	3	1	2	3	-	1	1	5	3	8	2	2	4	-	-	-	-	-	-	-	-	-	1	1	1	-	1	1	1	1	2	-	-	-
Total	8	3	11	16	19	35	10	13	23	56	42	98	21	14	35	-	-	-	1	-	1	1	1	1	2	1	4	5	4	4	4	4	8	-	-	-

poliomyelitis research, 1953 (Investigation III).

A request was received from the Medical Research Council, and approved by the Health Committee, to co-operate in an aim to study the pathogenesis of poliomyelitis in family contacts of paralytic cases, with special reference to the presence of viraemia, the excretion of virus in stools and the appearance of antibodies in the serum. For this purpose, material was required to be obtained from families where there were at least two children under 15 years other than the patient with no suspicious illnesses immediately preceding the onset of symptoms in the case. In such an event, arrangements were to be made for the collection of the following specimens from all members, including adults, other than the patient :—

- 10 c.c.'s of blood at the earliest possible moment.
- 10 c.c.'s of blood 21 days later.
- Specimens of faeces, at the earliest possible moment after the case had been diagnosed and again 7, 14 and 21 days later (4 sets of specimens altogether).

In a suitable case occurred ; the procedure described was followed and the Medical Research Council was supplied with specimens from eight contacts, other than the patient.

Particulars of the 11 cases are given below :—

City ward	Onset	Notified	Site of paralysis	Condition—February, 1954
Wythenshawe	13th May	21st May	None	Recovered ; no paralysis.
Reddick	10th May	28th May	None	Recovered ; no paralysis.
Rumpsall	4th June	8th June	Hip and thigh	Improved ; attending school ; no calipers.
St. George's	27th June	16th July	None	Recovered ; no paralysis.
Blackley	4th July	16th July	Left leg	Much improved ; no calipers.
Rumpsall	9th July	21st July	Shoulder	Improved ; resumed employment.
Wholme	9th July	23rd July	None	Improved ; attending school.
Old Moat	5th Aug.	14th Aug.	Right shoulder and arm	Good progress ; no paralysis.
Low Moor	14th Aug.	26th Aug.	Right shoulder and arm	Good progress ; no paralysis.
Northenden	5th Sept.	10th Sept.	Both legs and shoulder	Improving ; massage treatment.
Wenshaw	23rd Oct.	27th Oct.	Lower leg	Improving ; wears calipers.

Table showing the distribution of cases in City wards, and health of patients in February, 1954.

CITY WARD	Notifications		Confirmed cases		Paralytic		Non-paralytic		Deaths		Condition—February, 1954					
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Paralytic		Recovered; no paralysis		Unob- tained	
											M.	F.	M.	F.		
Alexandra Park		2														
All Saints			1													
Ardwick	2		1													
Barlow Moor	1		1		1											
Beswick	1															
Blackley	1	1		1		1									1	
Bradford																
Burnage																
Cheetham																
Chorlton-cum-Hardy																
Collegiate Church	1															
Crumpsall	2		2			2								2		
Didsbury	1															
Gorton North		1														
Gorton South																
Harpurhey																
Levenshulme	1	1														
Lightbowne	1															
Longsight																
Miles Platting		1														
Moss Side East		1														
Moss Side West	1															
Moston																
New Cross																
Newton Heath																
Newtown	1															
Northenden		1		1			1									
Old Moat		1		1												
Openshaw	2															
Rusholme	1		1													
St. George's	1		1													
St. Luke's	2															

Acute encephalitis (infective-post infectious).

One notification of acute encephalitis (infective) was received ; this related to a male aged 20 years who died two days after admission to hospital.

Pneumonia.

There were 576 cases of pneumonia notified ; consisting of :—

Primary pneumonia	{	lobar	320	} 576
		lobular	116	
		unclassified	69	
Influenzal pneumonia		.. .. .	71	

All these cases were investigated by the epidemiology investigators ; 206 of them were treated in hospital.

There were 338 deaths, consisting of 79 lobar, 234 lobular and 25 unclassified cases. In addition, there were 39 deaths from influenza associated with pneumonia.

Malaria.

No notification was received.

Anthrax.

One case of anthrax came to the notice of the Department in a man aged 45 years, who was admitted to hospital on the 11th July, 1953, and died the following day. An inquest was held and a verdict of "anthrax contracted during the course of his employment—accidental death" was returned. The first symptoms appear to have occurred on the 25th June, when a boil or carbuncle was noticed on the centre upper abdomen. He consulted his doctor, but did not complain of any other illness until the 7th or 8th July, when he was attended by his doctor after the appearance of another boil or carbuncle on his chest. He continued his employment during the whole of this period until 1st July when he returned home complaining of pains from the boils and in his stomach ; he remained at home until his removal to hospital. The man was employed as a motor-driver by an animal products manufacturer and his duties comprised collecting bones from butchers' shops in adjoining Lancashire districts, and, on intermediate days, from railway waggons sent to the city, chiefly from the Yorkshire area. Samples were obtained for examination of (1) scrapings from the lorry floor, (2) deposits of fat and debris from the lip of the receiving hopper and (3) representative samples of bones from ten sacks, all with negative results. The infected bed, bedding and certain clothing were removed for high pressure steam disinfection and some personal clothing was destroyed. The lorry was disinfected with pure formaldehyde.

Measles and German measles.

It will be observed from the following table that measles was exceptionally prevalent during the early part of the year. The peak of the outbreak was reached in the week ended January 9th, when 458 cases were notified, following which date there was a steady decline until the end of June, when the number of cases occurring resumed a normal level.

Cases notified	1953			
	1st quarter	2nd quarter	3rd quarter	4th quarter
MEASLES—				
By medical practitioners	3,693	1,992	211	44
„ others (parents, health visitors and school authorities) . .	437	306	104	11
Totals	4,130	2,298	315	55
GERMAN MEASLES—				
By medical practitioners	165	235	71	79
„ others (parents, health visitors and school authorities) . .	5	10	6	2
Totals	170	245	77	81

Whooping cough.

Whooping cough became compulsorily notifiable in October, 1939 ; from this date the source of notification was solely from the schools. Notifications received were as follows :—

1st quarter	2nd quarter	3rd quarter	4th quarter	Total
677	531	623	281	2,112

Incidence of whooping cough at age periods 0—5 and 5 years and over.

Disease	Under 5 years	5 years and over	Total
Whooping cough	1,433	679	2,112

Whooping cough immunization.

The special scheme of immunization of children between the ages of 6 months and four years against whooping cough which commenced in January, 1951, in co-operation with the Medical Research Council, ended on the 31st December, 1952. Suitable children were chosen for a " follow-up " of reactions and infections of those who completed a course of inoculations, and were kept under observation by a trained investigating staff who made routine monthly visits to the homes to record relevant information required by the Medical Research Council. The total number visited in this group, to October, 1953, was 6

which 3,000 were considered to have completed the survey, leaving 3,116 to be kept under observation until 30th June, 1954. The City Council agreed to the proposal of the Health Committee that whooping cough immunization should be continued, from 1st January, 1953, as part of the routine work of the Health Department, on similar lines to those approved for diphtheria immunization in accordance with Section 26 (2) of Part III of the National Health Service Act, 1946. Immunization against whooping cough thereupon became available at infant welfare clinics, day nurseries and at the central office from the beginning of the year to children over 5 months and not exceeding 5 years of age who have not suffered from the disease. In addition, since 1st April, 1953, general practitioners, by arrangement with the Department, have been able to receive immunizing agents and are requested to furnish records of primary and reinforcing immunizations performed, on prescribed forms, when payment is made accordingly. 3,626 primary immunization courses were completed; 1,000 in the authority's clinics, 89 in hospitals and, in the last nine months of the year, 297 by general practitioners.

Inoculations are postponed in the case of a child who is suffering from any illness, including upper respiratory tract infections (e.g. severe catarrhal conditions, influenza, etc.) or teething troubles, until the child has recovered. In addition, children who have been in known contact with whooping cough, or any infectious disease (measles, rubella, chickenpox, mumps, etc.) within four weeks prior to the date of attendance at the clinic, are not inoculated. In such instances the service is delayed for a period of four weeks from the date of known contact with the disease. Where a child has a previous personal history of convulsions, fits, epilepsy, mental retardation, hydrocephalus, otitis, pharyngitis, meningitis, or if there is a history of any of these in the mother, father, brothers or sisters, no inoculations are done.

The recommended procedure is to give intramuscularly, in the left deltoid, three doses each of 1 c.c. whooping cough vaccine at four-weekly intervals. If in this interval cannot be adhered to, the maximum period between each inoculation is 3 months from the 1st to the 2nd inoculation and 6 months between the 2nd and 3rd inoculation, after which it is considered advisable for the patient to commence the course of inoculations. A reinforcing injection of 1 c.c. is given 3 years after the completion of the primary immunization course if the child is under 5 years of age.

Typhoid and Paratyphoid fever.

Notifications were received, the diagnosis being subsequently corrected in some cases. Thus 2 cases occurred of which 1 was infected by *B. typhosus* and 1 by *B. paratyphosus* "B."

Specimens of blood were submitted to the laboratory, by medical practitioners, from patients with illnesses simulating typhoid and none gave positive Widal reactions.

Dysentery.

The following table shows corrected notifications of cases of bacillary dysentery by quarters of the year and by sex (Sonne 429, Flexner 6 and cholera diagnosis only, 26.) :—

	Males	Females	Totals
1st quarter	65	54	119
2nd quarter	92	83	175
3rd quarter	37	24	61
4th quarter	51	55	106
Totals	245	216	461

It will be observed in the table below that the biggest proportion of cases was in the under 5 age-group. This is accounted for by the fact that approximately 50 per cent. of cases occurred in outbreaks in day nurseries and is readily understood since such establishments afford opportunities for the spread of the disease ; all cases come to light due to the close supervision by the Department when an outbreak occurs. It is quite conceivable that outbreaks occur in the adult age-groups which are not notified owing to the usually insidious nature of the attack. Notifications of bacillary dysentery classified in various age groups are as follows :—

Age group	Males	Females	Totals
Under 5	172	150	322
5—14	43	22	65
Totals	215	172	387
15 and over	30	44	74
Totals	245	216	461

Scarlet fever.

968 cases of scarlet fever were notified ; 23.3 per cent of the cases were hospitalised and case mortality was nil.

Food poisoning.

The most noteworthy outbreak of food poisoning was caused by the organism *Salmonella enteritidis* var. *danzysz*, which had its origin in virus baits from a mice-infested bakery.

Only two cases of illness came to the knowledge of the Medical Officer of Health ; both occurred about the same date, in a woman and a man at different parts in Manchester which were 3½ miles apart. Similar symptoms of illness were experienced ; the woman remained at home but the man was hospitalised. Both patients were attacked by an identical organism and had consumed similar food slices about the same period. The investigations were directed to the source of the confection.

Inquiries of the respective local retailers of the vanilla slices led through dealers to a wholesale bakery as the common source of supply. It was learned subsequently that the bakery experienced a heavy infestation of mice about a month before the onset of illness in the patients concerned, and rodent operators had been engaged to deal with them. Special baits of bread soaked in a meat broth containing *Salmonella enteritidis* var. *danysz*, were laid in the bakery about that time.

The Medical Officer of Health immediately requested the rodent contractors to discontinue using virus baits of such a nature likely to cause illness in human beings.

During the investigation a number of mice were trapped in the bakery and from the spleen of one of them *Salmonella enteritidis* var. *danysz*, was isolated. The pathological examination of the mouse concerned was made about six weeks after the onset of the patients' illness. The actual contamination of the vanilla slices by the mice was obscure, but there appeared little doubt that the infection had been conveyed by them.

Faecal specimens obtained from the bakery workers on examination gave negative results.

Brief details of the case are contained in the following schedule of food poisoning incidents (see item No. 2) copied in the suggested form for annual return to the Minister of Health as in Appendix D (ii) of the revised memo. 88/Med. 1949.

There was a noticeable reduction in the incidence of food poisoning brought to the attention of the Medical Officer of Health in 1953, as compared with 1952. Single cases investigated numbered 25 as against 54 in 1952. Outbreaks involving two or more cases were 15 as compared with 24 the previous year. Incidents investigated and identified with food poisoning organisms were 30 as against 62 in 1952, and figures applied similarly to incidents investigated where organisms were not found were 10 and 16 respectively.

Outbreak caused by		Cases		Illness—clinical features		
Food	Agent	Notified	Ascertained	Average incubation	Main symptoms	Severity
1. Cold roast lamb	<i>Cl. welchii</i>	—	50	16-17 hrs.	Abdominal pain, diarrhoea, shivering and general weakness	Mild to moderate
2. { Vanilla slice .. Vanilla slice ..	<i>S. enteritidis</i> var. <i>danysz</i>	—	1	5-6 hrs.	Pyrexia, abdominal pain, vomiting and diarrhoea	Moderate
	<i>S. enteritidis</i> var. <i>danysz</i>	—	1	19 hrs.	Pyrexia, abdominal pain, vomiting and diarrhoea	Moderate
3. Not known ..	<i>S. thompson</i>	1	1	? 1 day	Diarrhoea, abdominal pain, anorexia (son) 1 case (father) symptomless	Moderate Mild
4. Not known ..	<i>S. bareilly</i>	1	—	?	Vomiting, abdominal pain, anorexia, pyrexia	Moderate
5. Not known ..	<i>S. dublin</i>	—	1	?	Loose stools, anorexia, diarrhoea	Very mild
6. Not known ..	<i>S. heidelberg</i>	1	—	?	Abdominal pain, diarrhoea, pyrexia, vomiting	Moderate
7. Custard	<i>Staph. aureus</i>	1	—	5 hrs.	Diarrhoea, vomiting, abdominal pain and anorexia	Moderate
8. Not known ..	<i>S. typhimurium</i>	—	1	?	Pyrexia, vomiting, anorexia, abdominal pain and diarrhoea	Moderate
9. ? Raw hen egg ..	<i>S. typhimurium</i>	1	—	few hours	Languid, vomiting, pyrexia, anorexia, diarrhoea	Moderate
Not known ..	<i>S. typhimurium</i>	1	—	?	Pyrexia, anorexia, vomiting, diarrhoea	Mild
11. Not known ..	<i>S. typhimurium</i>	1	—	?	Pyrexia, anorexia, vomiting, diarrhoea	Moderate
12. ? Raw egg albumen	<i>S. typhimurium</i>	1	—	17 hrs.	Pyrexia, abdominal pain, vomiting, diarrhoea	Moderate
13. Not known ..	<i>S. typhimurium</i>	1	—	?	Vomiting and diarrhoea ..	Moderate
14. ? Jellyed veal	<i>S. typhimurium</i>	1	1	?	Nausea, diarrhoea, abdominal pain, anorexia, vomiting	1 moderate 1 mild
15. Not known ..	<i>S. typhimurium</i>	1	2	?	1 patient—pyrexia, vomiting, convulsions and unconsciousness 1 patient 1 patient symptomless ..	Severe Very mild Mild
16. ?	<i>S. typhimurium</i>	—	2	?	Hoarseness, sore throat, diarrhoea, abdominal pain and vomiting	Severe
17. Not known ..	<i>S. typhimurium</i>	—	2	?	Loose bowels	Mild
18. Not known ..	<i>S. typhimurium</i>	1	2	?	Pyrexia, abdominal pain, diarrhoea	Mild

ng.

were identified.

Results of laboratory investigations			Origin and preparation of food suspected	Place at which food causing illness was consumed	Estimated number at risk	Probable origin of infection or contamination of food
Food samples	Food handlers (faecal specimens)	Other (faecal specimens)				
6 negative	25 (8 + ve)	—	Wholesale butcher and school central kitchen	School canteen, canteen centre and central kitchen	2,150	Overnight storage of cooked meat which was reheated.
—	—	Contacts 7 negative 7 (mice) negative 1 (mouse) +ve	Wholesale bakery and local confectioner's shop	Home	? 8	The two cases occurred about the same time. Wholesale bakery was being treated for mice infestation.
—	25 negative	5 contacts negative	Wholesale bakery and confectioner's shop near place of work	Place of work	? 1	
—	—	3 negative contacts	Gravy from tinned steak	Home	5	Father as "carrier" may have infected child patient during feeding.
—	—	6 negative	Not known	Not known	7	Child had been in hospital frequently with gastro-enteric conditions.
—	—	2 negative	Not known	Not known—either home or day nursery	?	—
—	—	2 negative	Not known	Not known	3	Patient 6 months old.
—	—	?	In adjoining county borough	Place of work	?	Food purchased and consumed in Borough of Stretford.
—	—	3 negative	?	Home	4	Several foods under suspicion.
—	—	2 negative	?	Home	3	—
—	—	3 negative	?	Home	5	Several foods under suspicion.
—	—	5 negative	?	?	6	Returned to hospital 2 weeks after discharge.
—	2 negative	3 negative	?	Home	4	—
—	—	1 negative	?	Home	8	Sister of patient ill about a week before.
—	—	1 negative	Local grocers	Place of work	3	—
—	—	1 negative	?	Home	3	Several foods under suspicion.
—	—	2 negative	?	Home	4	Raw and lightly boiled hen eggs eaten.
—	—	2 negative	?	Hospital or Home	?	Had been home from hospital 2 weeks
—	—	2 negative	Purchased locally	Home	5	Several foods under suspicion.

Outbreak caused by		Cases			Illness—clinical features		
Food	Agent	Notified	Ascertained	Average incubation	Main symptoms	Severity	
19. Not known ..	S. typhimurium	1	—	?	Anorexia, abdominal pain, diarrhoea	Moderate	
20. Not known ..	S. typhimurium	1	—	?	Diarrhoea, abdominal pain, pyrexia	Moderate	
21. Not known ..	S. typhimurium	1	—	About 1 day	Abdominal pain, diarrhoea and vomiting	Moderate	
22. Not known ..	S. typhimurium	1	1	9-10 hrs.	Nausea, vomiting, diarrhoea, pyrexia, cramp	Moderate	
23. Not known ..	S. typhimurium	1	2	?	Diarrhoea, vomiting and bronchitis 2 cases symptomless	1 case moderate	
24. Not known ..	S. typhimurium	1	1	?	Pyrexia, vomiting, diarrhoea, abdominal pain 1 case symptomless	Moderate	
25. Not known ..	S. typhimurium	1	—	?	In hospital	?	
26. to 30. Not known ..	S. typhimurium	—	5	—	Occurred in hospitals	—	

Cases where causal

Outbreak caused by		Cases			Illness—Clinical features		
		Notified	Ascertained	Average incubation	Main symptoms	Severity	
31. Not known		2	—	?	Abdominal pain, diarrhoea, vomiting 1 case symptomless	Mild	
32. Not known		—	1	9 hrs.	Abdominal pain, diarrhoea and vomiting	Mild	
33. Not known		1	—	?	Vomiting and diarrhoea ..	Mild	
34. Not known		1	—	?	Diarrhoea	Very mild	
35. Not known		—	5	2 hrs.	Vomiting and diarrhoea ..	Mild	
36. Not known		1	—	?	Shivering, catarrh, abdominal pain, nausea, vomiting and diarrhoea	Moderate	
37. Not known		1	—	4-5 hrs.	Abdominal pain, diarrhoea ..	Mild	
38. Not known		1	—	?	Abdominal pain, diarrhoea and vomiting	Mild	
39. Not known		—	3	1 hr.	Vomiting and diarrhoea ..	Mild	
40. Not known		—	2	?	Vomiting, abdominal pain, pyrexia, diarrhoea	1 moderate 1 mild	

Results of laboratory investigations			Origin and preparation of food suspected	Place at which food causing illness was consumed	Estimated number at risk	Probable origin of infection or contamination of food
Food samples	Food handlers (faecal specimens)	Other (faecal specimens)				
—	—	1 negative	?	Home	2	Several foods under suspicion.
—	—	2 negative	?	Home	3	Child 3 months old.
—	—	3 negative	?	Meals at Chester and on the Wirral peninsular on day trip	120	Several foods under suspicion.
—	—	1 negative	Local butcher	Home	3	Gravy prepared from beef, reheated and used 2 days later.
—	—	3 negative		Home	6	Cross infection from symptomless member of family.
—	—	4 negative		Blackpool when on day trip	?	Several foods under suspicion. Has continued to excrete organisms regularly for many months.
—	—	4 negative		?	?	5	In hospital with otitis media.
—	—	—	—	? Hospitals	?	Occurred in hospital and resident outside Manchester.

found.

Results of laboratory investigations			Origin and preparation of food suspected	Place at which food causing illness was consumed	Estimated number at risk	Probable origin of infection or contamination of food
Food samples	Food handlers (faecal specimens)	Other (faecal specimens)				
—	—	—	Locally purchased	Home	2	Several foods under suspicion.
—	—	—	Not known	St. Asaph or Rhyl	?	Meals consumed during motor-coach trip.
—	—	—	Purchased locally	Home	2	Pork and mince pie consumed.
—	—	—	Purchased locally	Home	1	Possibly tinned crab.
negative	—	—	Wholesale butcher, School central kitchen	School canteen	2,065	Possibly roast pork.
negative	—	3 negative	—	—	4	"Cashew" nuts suspected.
—	—	3 negative	?	City restaurant	?	Oysters or chicken suspected.
—	—	5 negative	?	Home	5	Dessicated coconut or walnut kernels suspected.
negative	—	—	Spain	Home	4	Tinned tomatoes suspected.
—	—	3 negative	?	?	6	No suspicious food.

MENTAL HEALTH SERVICE.

This part of the report gives particulars of the operation of the Council schemes during 1953 under the Mental Deficiency Acts, 1913-38, and Lunacy and Mental Treatment Acts, 1890-1930 as amended by the National Health Service Acts, 1946-52.

Administration.

Mental Health Sub-committee.

The Service is operated by the Council through the Health Committee and a Mental Health Sub-committee has been established consisting of 14 members including a co-opted representative of the Manchester District Nursing Institution. The Sub-committee meets each month and deals with all matters within the purview of the local health authority relating to mental health, with the exception of staff appointments, salaries, wages and conditions of service. The Sub-committee has no delegated powers and all its proceedings are subject to confirmation by the Health Committee and the City Council.

Staff.

Three duly authorised officers are employed to initiate proceedings for the care and treatment of the mentally disordered. The field work on the mental deficiency side is carried out by five mental health visitors, all experienced social workers, and the care and after-care of mental illness is in the hands of two qualified psychiatric social workers. The Departmental medical staff, approved for the purpose of giving medical certificates under the Mental Deficiency Acts.

The Department regretted the loss of two of the staff during the year. The Administrative Assistant for the Service resigned in December, 1953, in order to take up an appointment outside Manchester, and one of the psychiatric social workers was obliged to relinquish her appointment in August, 1953, for domestic reasons.

The number of staff employed in the occupation centres is given in the following table and is in accordance with the recommendations of the Minister of Health contained in Circular 91/49.

Occupation centre staff.

Occupation centre	Supervisor	Assistant supervisor	Caretaker	Cleaner	Cook
Ancoats	1	2	—	1	—
Victoria Park	1	6	1*	2	2
Wythenshawe	1	2	—	1	—
Total	3	10	1	4	2

* Resigned 9th April, 1953, and appointment brought to an end.

Co-ordination with hospitals.

The shortage of hospital accommodation, which is of course not only a but also a national problem, continued throughout the year to beset the administration of the Service. This shortage was particularly serious on the mental deficiency side of the work and, at the end of the year, the names of no less than 96 mental defectives were on the Regional Hospital Board's waiting list for admission to permanent residential accommodation. These are classified according to sex, age and type in the following table which also gives an indication of the period of time that these patients have been waiting for vacancies.

Type, age and sex distribution of mental defectives awaiting hospital admission.

ON WAITING LIST	MALE								FEMALE								TOTAL
	Under 16				Over 16				Under 16				Over 16				
	(a)	(b)	(c)	(d)	(a)	(b)	(c)	(d)	(a)	(b)	(c)	(d)	(a)	(b)	(c)	(d)	
Years	—	2	—	—	—	—	—	—	1	—	—	—	—	1	—	—	4
.. .. .	1	2	1	—	—	1	—	—	1	1	—	—	—	1	—	—	8
.. .. .	2	5	1	1	—	—	2	—	3	3	—	—	—	1	1	2	21
.. .. .	3	6	1	—	—	3	1	2	1	—	—	—	1	1	—	1	20
Year	4	3	—	—	—	8	2	—	3	2	—	1	—	16	4	—	43
waiting list, 1st December, 1953 ..	10	18	3	1	—	12	5	2	9	6	—	1	1	20	5	3	96

(a) cot and chair cases.

(b) ambulant low grade cases.

(c) medium grade cases.

(d) high grade cases.

Attention must again be made of the very great help that some of the mental deficiency hospitals have given in providing temporary vacancies to alleviate acute crises.

Admissions to mental deficiency hospitals numbered 90 during 1953. The age and sex distribution, along with the authority on which they were admitted, is shown in the following table. The number of persons admitted to mental hospitals appears under the section of this report dealing with the Hospital and Mental Treatment Acts.

Mental defectives admitted to mental deficiency hospitals in 1953.

Method of Admission	Male		Female		Total
	Under 16	Over 16	Under 16	Over 16	
Admission	3	9	4	9	25
By parent	8	2	9	2	21
By Court Order	1	3	—	1	5
By order of the Secretary of State ..	—	—	1	1	2
By order of the Secretary of State ..	1	—	2	—	3
By order of the Secretary of State ..	14	3	11	6	34
Total	27	17	27	19	90

Close co-operation continued to exist between the Service and mental and mental deficiency hospitals in the region, and during 1953 following domiciliary reports were supplied to the hospitals upon request.

Social history, progress, licence and recertification reports.

Type of report	Male		Female	
	Under 16	Over 16	Under 16	Over 16
Social history	—	5	—	20
Progress	2	125	—	42
Licence	11	134	2	67
Recertification	16	136	21	92
Total	29	400	23	221

Voluntary associations.

No duties were delegated to voluntary associations. With the approval of the Minister, the Council continued their annual contribution of £100 in support of the general work of the National Association for Mental Health. A party of 26 pupils from the occupation centres had a week's holiday at the Association's Home at Rhyl and, in September, 1953, the Association started a further 12 month's course based on Manchester for the training of occupation centre staff.

Negotiations continued throughout the year with the Mental Aftercare Association for the establishment of a mental health convalescent home in the North-West.

Training of staff.

In March, 1953, the Council seconded the Administrative Assistant for the Service to a mental health course organised by the National Association for Mental Health in conjunction with the University of London.

Two of the staff attended the Association's Manchester course for the training of occupation centre staff.

Two occupation centre assistant supervisors attended a refresher course run by the Association in Birmingham.

The Mental Deficiency Acts, 1913/38.

Ascertainment.

A total of 195 new cases of mental deficiency were ascertained in the region during the year; of these, 166 were subject to be dealt with under the Mental Deficiency Acts. The ascertainment and disposal of these cases are shown in the following tables:-

Ascertainment of mental deficiency—

(a) new cases ascertained in 1953.

	Education Act, 1944		Other sources		Total
	Section 57 (3)	Section 57 (5)	Subject to be dealt with	Not subject to be dealt with	
.. .. .	31	33	18	19	101
s	28	31	25	10	94
Total ..	59	64	43	29	195

(b) disposal of mental defectives ascertained in 1953.

Method of disposal	Male		Female		Total
	Under 16	Over 16	Under 16	Over 16	
ectives found to be "subject to be dealt with"—					
mitted to institution	3	1	2	6	12
ced under guardianship	1	1	1	—	3
en to places of safety	1	1	1	—	3
ced under statutory supervision	33	39	39	34	145
d or removed from area ..	1	1	—	1	3
ion not taken by end of year..	—	—	—	—	—
ification cancelled	—	—	—	—	—
ectives not at present "subject to be dealt with"—					
ced under voluntary supervision	2	13	1	8	24
er found not to be defective ..	—	—	—	—	—
l or removed from area	—	1	—	1	2
on unnecessary	2	1	—	—	3
on not taken by end of year..	—	—	—	—	—
Total	43	58	44	50	195

Forms of care.

2,425 mental defectives were known to the Service on the 31st December 1953. Of these 1,005 (41 per cent.) were under statutory supervision (9 per cent.) were under voluntary supervision, 1,186 (49 per cent.) were in institutions, 11 under guardianship and 4 in a place of safety.

Guardianship.

In October, 1953, the Council resolved to try to increase the use of guardianship as a form of care for those mental defectives who require greater protection and control than can be afforded by supervision but who are not basic candidates for admission to mental deficiency hospitals.

By the end of the year 5 cases had been found guardians under these arrangements.

Removal from supervision.

Removals from voluntary supervision numbered 24 and 85 others taken off statutory supervision during 1953. Details of these removals are as follows:—

Removal of defectives from supervision.

Reason for removal	Male		Female	
	From statutory supervision	From voluntary supervision	From statutory supervision	From voluntary supervision
Capable of managing themselves and their affairs	3	5	—	2
Transferred to voluntary/statutory supervision	—	2	2	2
Transferred to other authorities	8	1	6	2
Lost sight of	1	3	—	3
Died	5	—	2	—
Other causes	29	2	29	2
Total	46	13	39	11

Marriage and children.

Of the total number of mental defectives known to the Service, — and 4 females married during 1953. 3 defectives gave birth to children during the year and there were 4 illegitimate births to mental defectives during the year.

Occupation centres.

Attendance.

The total number of pupils attending the occupation centres at the end of 1953 was 217. This was an increase of 47 during the year, attributable partly to improved ascertainment and partly to the special scheme of transfer introduced early in 1953. Vacancies were provided for 6 pupils from the Council of the Cheshire County Council and for 4 pupils from the Lancashire County Council. The following table gives details of the age and sex groups of pupils attending the three centres at the end of the year.

Attendance of mental defectives at occupation centres.

Occupation centre	Male		Female		Total
	Under 16	Over 16	Under 16	Over 16	
s	17	4	12	4	37
a Park	54	19	44	9	126
shawe	23	12	17	2	54
r awaiting vacancies	—	—	—	—	—
Total	94	35	73	15	217

opment.

In November, 1953, the Council approved building plans for the erection of a further centre and these were forwarded to the Minister of Health for approval as a capital building proposal. This centre will be located in Blackley and will serve the northern parts of the City.

al.

Satisfactory reports on the centres were received from the Ministry of Health following visits by an Inspector of the Board of Control.

A party of 26 pupils from deserving families had a week's holiday at Rhyl in August, 1953. Parties and visits to the circus again formed features of the Christmas festivities.

Lunacy and Mental Treatment Acts.

Notifications and admissions.

Notifications of alleged insanity amounted to 873 during the year and of these 634 were admitted to mental hospitals.

Lunacy and Mental Treatment Acts, 1890/1930.

(a) ascertainment.

Source of notification	Male	Female	Total
Medical practitioners	220	340	560
Hospitals and clinics	87	74	161
Corporation departments	13	15	28
Local authorities	23	24	47
Public	23	30	53
Other sources*	6	18	24
Total	372	501	873

* includes patients dealt with on behalf of other authorities.

(b) disposal.

	Male	Female	Total
Hospital admission			
(a) voluntary	180	167	347
(b) temporary	—	3	3
(c) certifiable	132	152	284
Referred to other departments or agencies	32	47	79
No further action necessary	71	89	160
Total	415	458	873

Care and after-care.

In the early part of the year the Council resolved to try to recruit services of a consultant psychiatrist for a period of two sessions a week. This was subsequently approved by the Ministry of Health. Consultations were held in place with the University and also with the Regional Hospital Board but it was not possible to make an appointment before the end of the period under review.

Owing to town-planning difficulties, the Mental After-Care Association were unable to make much headway with their proposed convalescent home in the North-west, but in 4 cases the Council approved periods of recuperation in homes belonging to the Association in other parts of the country.

The statistics relating to care and after-care are shown in the following table:—

Care and after-care of mental illness.

	Male	Female	Total
Number of visits or interviews	526	851	1,377
Removed from care	95	112	207
Referred for medical report:—			
(a) to general medical practitioner	1	4	5
(b) to psychiatrist or clinic.. .. .	1	3	4
Interviews with other agencies, departments, or employers	75	71	146
Total.. .. .	698	1,041	1,739

HEALTH EDUCATION.

Public interest in matters of health education was maintained through the following media:—

1. field workers—health visitors and sanitary inspectors,
2. publicity by means of lectures, publications, exhibitions, and
3. co-operation with organizations interested in matters of health education of benefit to the general public.

Field workers, during the course of their duties, are able to advise members of the public. The sanitary inspector, who is investigating any sanitary nuisance, is able to offer advice on other matters concerning the state of property. A health visitor, on after-care work, can help householders with questions of health. It is also the practice of field workers, when investigating cases of infectious disease, to distribute publications giving advice on care of the patient and the cleansing of the house.

Public exhibitions were held in Manchester at which Departmental exhibits could be displayed. The distribution of pamphlets and publications has been continued, the main avenues being through public libraries, child welfare centres and school health clinics; 2,000 copies of the magazine "Better Health" were distributed in this way each month. The campaign for immunization against diphtheria was continued by the display of posters and the use of advertisements in the programmes and handbooks published in connection with the Wythenshawe and Levenshulme Civic Weeks, the Roman Catholic and Church of England Whit-Week processions and the Manchester Corporation Transport Department's booklet "See Manchester by bus".

Students interested in the health services administered by the City Council attended the Department, and lectures have been given by medical practitioners and officers of the Department to various organizations.

A summary of the educational work in connection with the child welfare centres and in the Health Department is given below:—

Social and business organizations. Lectures were given by members of the health visiting and the sanitary services staff as follows: 11 to the Old People's Club; 8 to the Women's Co-operative Guild; 4 each to the Women's Guild and licensed houses' staff; 2 each to the Teachers' and Parents' Fellowship, the Young Mothers' Club, Railway Executive staffs and the Girl Guides; and 1 each to the Women's Assembly, the Wesley Guild, the Church Mothers' Fellowship, the Girls' Friendly Society, the Church Guild, the Community Association Mothers' Club, the International Group Y.W.C.A., the Senior Business Women's Group Y.W.C.A., the Over 60 Club, the Chorlton Poultry Club and the staff of a health department.

H.M. Prison. Two courses of lectures on mothercraft were given to women with young children in H.M. Prison.

Student nurses. Lectures and practical experience were arranged for student nurses from local hospitals; 121 attended a lecture given by the Superintendent Health Visitor and spent a session on a district with a health visitor; 43 observed the work of an infant clinic at a child welfare centre for a session and followed this by a discussion with the staff; 3 lectures on the social aspects of disease were given to student groups by child welfare centre superintendents.

Hospital tutors. 14 hospital tutors observed the practical work of the Department by spending a session on a district with a health visitor and one at a child welfare centre infant clinic.

Queen's nurse students. 3 lectures were given to these students, 1 by the Welfare Officer for the unmarried mother and her child, and 2 by the Superintendent Health Visitor.

- (f) Student teachers. 3 groups visited child welfare centres to observe the work of clinics as follows: 18 students from the Manchester Teachers' Training College (with 2 students from other teachers' training colleges; and 2 students from the Collyer Housecraft.
- (g) Health visitor tutors' course. A student from the Royal College of Nursing worked in the Department for 2 weeks with the tutors to the student health visitor practical and teaching experience, and with other senior members of the staff for additional experience.
- (h) Health visitors. 2 lectures on environmental hygiene were given to health visitors by a sanitary inspector.
- (i) Nursery students. 35 senior students from the Nursery Training Centre attended clinics at child welfare centres for visits of observation and an explanation of the work.
- (j) Princess Christian College students. A group of students observed the work of an infant clinic at a child welfare centre.
- (k) Students in social administration (Manchester University). The Superintendent Health Visitor discussed the work of the health visitor with 2 groups of 3 students, who spent a half-day a week for 6 weeks obtaining practical experience at an infant clinic at a child welfare centre. They also worked for 1 session on a district with a health visitor. 1 student worked with the Welfare Officer for the unmarried mother and child on 1 day a week for 6 weeks to gain experience.
- (l) High school students. A lecture on environmental hygiene was given to the students of a girls' high school.
- (m) Medical students. 8 students from the Department of Child Health, St. Mary's Hospital, attended a day nursery and an infant clinic at a child welfare centre each month. The students paid a total of 8 visits to ante-natal clinics at child welfare centres for experience on that work.
- (n) Doctors. Medical practitioners studying for the Diploma in Public Health examination have attended various sections of the Department to obtain specialized experience. 5 members of the staff. 5 doctors studying for the Diploma in Child Health examination attended a total of 30 sessions at infant clinics at child welfare centres.
- (o) Visitors from overseas. A health visitor from New Zealand and one from Canada spent a day in the Department with various members of the staff for experience of the work in this country. Two Russian pediatricians were shown the work of the Department in relation to children.

AMBULANCE AND TRANSPORT SERVICE.

1. Ambulance Service.

Introduction.

The Manchester Ambulance Service has continued to operate in accordance with the provisions of Section 27 of the National Health Service Act, 1948, as amended by Section 24 of the National Health Service (Amendment) Act, 1949.

At the end of December, 1953, the ambulance fleet consisted of the following vehicles:—

- 53 ambulances,
- 5 sitting case vehicles with a seating capacity of more than four
- 4 sitting case vehicles with a seating capacity of four or less

four of which were new vehicles obtained in 1953, as replacements for previous vehicles. The average age of the fleet is now six years.

These vehicles are distributed between the main Headquarters of the Service at 81, Belle Vue Street, West Gorton, and five sub-depots. Vehicles at the Headquarters also operate each day from two of the larger hospitals in the area under the direct control of an Ambulance Service Sub-depot Supervisor. The sub-depots are sited so as to give the maximum service in the shortest possible time, particularly with regard to accidents and emergency calls.

As a general rule, all requests for ambulance transport are received in the Control Room situated at the Headquarters Depot. These requests are dealt with either by vehicles from the Headquarters Depot or are telephoned by direct line to the sub-depots according to the availability of vehicles and also to the distance of the City from which the ambulances have to collect the patients. At two of the larger hospitals, direct contact between the Hospital Transport Officer and the Ambulance Service Sub-depot Supervisor is maintained, at two where an Ambulance Sub-depot is situated within the grounds of each of the hospitals and at one where the Ambulance Service Sub-depot Supervisor discharges his duties in the Hospital Transport Office. Close liaison is thus maintained and duplication and overlapping of orders is eliminated.

Additional.

The demand for ambulance transport continued to increase, particularly in connection with the transport of out-patients, the removal of which accounted for approximately 68 per cent. of all patients conveyed. 107,677 out-patients were dealt with during the year compared with 103,585 in 1952. The increased demand resulted in an increase of 3.5 per cent. in the total mileage of the ambulance fleet although there was a 10 per cent. increase in the total number of patients carried. This increased demand was met without any addition to the ambulance strength but the appointment of three additional ambulance drivers and three additional ambulance attendants for the purpose of holiday and sickness relief helped materially in dealing with the extra work.

Operational record.

	1952	1953
Number of calls	90,118	97,721
Patients removed	143,054	158,364
Total mileage	817,865	846,023
Mileage outside Manchester	18,426	24,532

Analysis of removals.

	1952	1953
Accidents	8,091	8,840
Infectious	10,309	10,178
General	124,654	139,346
	<u>143,054</u>	<u>158,364</u>

Removals.

66 cases of infectious disease other than tuberculosis were conveyed to hospitals, 1,539 of which were removed to Monsall Hospital. 1,539 patients suffering from various forms of tuberculosis were removed to hospitals and 7,456 tubercular out-patients were conveyed to and from clinics and sanatoria, for treatment.

Hospital Car Service.

The Hospital Car Service, which is operated by the local branch of the Women's Voluntary Services on behalf of the Manchester Ambulance Service, has continued to augment the Ambulance Service and is mainly concerned with the transport of walking cases to and from hospitals within the City for patients' treatment and in-patients on discharge from hospitals within the City to their homes. The operational record of the 16 drivers normally utilized is as follows:—

	1952	1953
Journeys	9,359	8,244
Patients.. .. .	19,615	18,083
Mileage.. .. .	145,917	142,842

Staff.

The number of operational staff authorised was increased by one Sub-Supervisor, three ambulance drivers and three ambulance attendants during the year and, at the 31st December, 1953, comprised the following:—

Sub-depot supervisors	6
Ambulance drivers	65
Ambulance attendants	68
	139

Of this number, 128 or 92 per cent. had qualified or requalified in the year within the last three years. The remaining 11 were all attending first aid courses at the end of the year, being either new entrants into the Service or persons who had last requalified in 1950.

The ambulance drivers together with the drivers of the pool cars and commercial vehicles were again entered in the National Safe Driving Competition. The rules of this Competition require that, in order to qualify for an award, the driver must have been free from any accident, however serious, to person or property for which he was in any way blameworthy and this rule has been enforced rigidly in order both to maintain the value of the award and also to maintain the high standard of driving which is expected from members of the Ambulance Service.

76 drivers were entered for the 1953 Competition, of whom 66 ultimately qualified for an award, as follows:—

Bar to 20 years' brooch	4
Bar to 15 years' brooch	2
15 years' brooch	1
Bar to 10 years' medal	5
10 years' medal	1
Bar to 5 years' medal	9
5 years' medal	7
Diploma	37
	66

Defence.

Approximately 100 members of the Ambulance Section of the Manchester Defence Corps were engaged in sectional training, after having completed basic general training and a full first-aid course as prescribed by the Office.

A regular rota of attendance at the main Ambulance Depot at Belle Vue has been maintained in order to give the volunteers an opportunity of accompanying ambulance crews on their normal duties, to observe the methods of handling and disposing of patients. Training centres have been opened at following addresses, in addition to that at the Belle Vue Street Ambulance Depot:—

Chorlton Ambulance Depot, off Barlow Moor Road, Chorlton-cum-Hardy.

Civil Defence Training School, Livesey Street, Collyhurst.

Railway clerks' dining hall, Cornwall Street, Openshaw.

Lectures have been given on the following subjects:—

The war-time organization of the Ambulance Service.

First-aid revision.

Blanketing of stretchers and loading of ambulances.

Map reading.

Mechanism of a motor ambulance.

U.X.B. and damage control.

The first full course of driving instruction was organized during the summer months, to which 20 volunteers were invited. 15 trainees completed the course, passed the official driving test, one failed and two were unable to take the test due to sickness. A regular programme of ambulance driving practice has been arranged for volunteers who could either drive on enrolment or who have remained since joining.

Municipal Car Pool.

The Municipal Car Pool, which consisted of 12 saloon cars, has continued to be administered and operated by the Ambulance and Transport Service. These cars are used by the various committees and officials of the Corporation and the mileage operated was 91,148 miles compared with a mileage of 124,588 miles in 1952. Due to a reduction in demand for the use of these cars, however, a programme designed to reduce the number of cars operated was initiated during the year and, at 31st December, 1953, 11 cars were being operated.

Commercial vehicles.

Throughout the year two vans and one lorry were operated on Health Committee functions. The mileage run was 13,252 compared with 35,034 in 1952, when more vehicles were being operated.

Immunization unit.

The mobile immunization unit has continued to operate and has provided facilities for the immunization of children against diphtheria to the parents of children (under five years of age) who could not attend at child welfare centres and nurseries. In addition, special visits were made to those areas where the percentage of immunized pre-school age children was low. This vehicle, which is an inverted single-deck omnibus, operates from the Monsall Sub-depot and the mileage during 1953 was 7,736.

5. Disinfection service.

A disinfecting station forms part of the Monsall Sub-depot and two disinfectors are used for the disinfection of clothing and bedding. In addition a formalin chamber is used for articles which cannot be subjected to the process. One of the commercial vehicles is utilized as a bedding van for collection of infected bedding, clothing, etc., and has been designed so as to ensure that complete disinfection of the interior can be carried out before being put into service for the return of disinfected articles. The disinfection of 16,334 articles was carried out, this total consisting of the following:—

Blankets	2,442
Sheets	274
Pillows	1,206
Bolsters	46
Quilts	37
Mattresses	1,724
Beds	72
Articles of clothing	5,505
Library books	616
Miscellaneous	4,412
	<hr/>
	16,334

The collection and return of these articles necessitated a mileage of 1,000,633 miles being undertaken by the bedding van.

6. Clinic.

A clinic for the treatment of persons suffering from scabies and verminous conditions is situated at the Monsall Sub-depot, and the following show the numbers of treatments given during the year:—

Scabies	492
Verminous conditions	521
School children	159

7. Operating mileage.

The total mileage operated by the various sections of the Ambulance and Transport Service was as follows:—

Ambulance Service	846,023
Municipal Car Pool	91,148
Commercial vehicles	13,252
Bedding van	12,841
Immunization Unit	7,746
	<hr/>
	971,010

Compared with the 1952 total of 1,000,633 miles, this total shows a reduction of 29,623 miles which is due, mainly, to the reduction in the numbers of pool cars and commercial vehicles operated.

LANGHO COLONY FOR EPILEPTICS.

Dr. G. A. Thompson, Medical Superintendent.

STAFF:

G. A. Thompson, M.R.C.S.(ENG.), L.R.C.P.(LONDON) Medical Superintendent.
 Miss E. J. Smith, S.R.N., R.M.N., R.M.P.A. Matron.
 S. A. C. Bunn, F.C.C.S., A.H.A. Secretary-Steward.

On the 31st December, 1953, there were maintained in the Colony 286 male and 292 female residents; of these 218 were chargeable to the Manchester Corporation and 360 to other authorities, as under:—

<i>County Boroughs.</i>	<i>County Councils.</i>
Arrow-in-Furness 1	Cheshire 11
Birkenhead 2	Durham 1
Birmingham 9	Glamorgan 3
Blackburn 21	Lancashire 143
Blackpool 12	Leicestershire 1
Bolton 7	Middlesex 7
Bottle 2	Monmouthshire 1
Bradford 2	East Suffolk 7
Barnley 13	Surrey 7
Boydon 2	Worcestershire 1
Bucksbury 2	Yorkshire, North Riding 2
Burton 1	Yorkshire, West Riding 10
Carlisle 1	
Chichester 2	
Colchester 7	<hr/>
Derby 3	194
Derby 24	
Dewsbury 3	
Durham 1	
Edinburgh 7	
Exeter 6	
Gloucester 1	
Grimsby 27	
Hull 2	
Leeds 2	
Leicester 2	
Lincoln 2	
Manchester 2	
Nottingham 2	
Sheffield 2	
Southampton 2	
Stoke-on-Trent 2	
Wolverhampton 2	
Wrexham 2	
<hr/>	
164	
	<hr/>
	Total: 360

The total number of epileptic seizures during the year was 25,573.

	Severe	Slight	Total	Average	Numbers maintained
Male	8,324	7,088	15,412	58	286
Female	4,409	5,752	10,161	35	292
Totals	12,733	12,840	25,573	—	578

The classification of the incidence of seizures during the year is as follows

	Male	Female
Status epilepticus	1	—
Increased incidence	72	6
Decreased incidence	84	37
No change	83	180
No seizures during the year	52	69

There were:—

	Male	Female	Total
Admissions	31	27	58
Re-admissions	29	4	33
Discharges	43	26	69
Deaths	8	6	14

Treatment at other hospitals and clinics for:—

	Male	Female
Blackburn Royal Infirmary:—		
Fractures Department	32	57
Ear, Nose and Throat Department	14	4
Skin Department	8	8
Medical Department	3	3
Surgical Department	16	10
Radiotherapy Department	2	7
Orthopaedic Department	8	4
Physiotherapy Department	2	1
Gynaecology Department	—	2
X-Rays Department	5	7
Surgical appliances and garments	2	10
Hearing-aid Department	2	—
Wythenshawe Hospital:—		
Plastic Unit	1	1
Ministry of Pensions (Quay Street, Manchester):—		
Artificial limbs	1	1
Chest Clinic, Blackburn	2	3
Transfers, for operative treatment, to:—		
Royal Infirmary, Blackburn	9	5
Queens Park Hospital, Blackburn	2	2
Transfers, for observation, to:—		
Powick Mental Hospital, Worcester	1	—
Queens Park Hospital (Mental Ward)	—	2
Whittingham County Mental Hospital	—	1

The employment of residents on 31st December, 1953, was as follows:—

	Male	Female
Domestic—the homes, etc.	90	54
Domestic—Administrative block	10	14
Domestic—general kitchen	—	8
Laundry	2	22
Sewing room	—	25
Occupational therapy hut	17	—
Grounds, coal-yard and wood shed	50	—
Engineers' department	2	—
Works department	1	—
Shoemakers' department	2	—
Sailors' department	1	—
Night duties in the homes	20	50
Office and general stores	5	—
Assembly hall duties	4	—
Rooms	13	—
Kitchen gardens	8	—
Sports field duties	6	—
Elderly, infirm or otherwise unemployable	55	119
Totals	286	292

General remarks.

Throughout the year the health of the residents has continued to be very satisfactory. In January the Colony was visited by the Mobile Mass Radiography Unit of the Manchester Regional Hospital Board; all the Colonists and the majority of the staff were X-rayed—the consequent report from the Unit being very good. During the year various new anti-convulsant drugs for the treatment of epilepsy were introduced and trials conducted as to their relative merits. The best of these drugs have now been incorporated into the standard methods of treatment.

Of interest to note that all through the year the Colony has been full to capacity, and there is still a long waiting list for admission, especially on the West Coast—applications having been received from all over the country.

Most residents have been occupied as much as possible, although it will be seen that a considerable proportion of the residents, while up and about, are prevented from being employed by age and infirmity.

Amusements.

Various amusements were enjoyed by the residents during the year; the Christmas Week proving itself quite a high-light in our life here. During that week there was a very full programme of dances, extra cinema shows, concerts and an open-air Historical Pageant, depicting the Queens of the past who have reigned in their own right and also paying homage to our new Sovereign Lady, Elizabeth II, which was given by the Colony Rangers, staff and residents.

Like all the residents went on their day's outing to the seaside and at the same time they all visited a local pantomime in Blackburn.

Unfortunately, it rained on our Annual Sports Day; this had to be postponed and was held at a later date.

Cricket and football matches take up a considerable part of the residents' spare time, and I am pleased to report that the Colony cricket team, consisting of staff and residents, had a most successful season in the North-East Lancashire League " B " Division, finishing up by winning the championship.

I would also like to add that the Blackburn Rovers' third team have played several matches on our ground; these have been greatly appreciated by all the residents.

Official visits

We have been visited by Committee members and officials from the Welfare Departments of Blackburn C.B., Dewsbury C.B., Middlesex and Warrington C.B., who expressed themselves well satisfied with the conditions and treatments of their residents. We also received a visit from a Senior Medical Officer and a Chief Welfare Officer of the Ministry of Health.

On the 1st July, we were pleased to entertain a number of students who were taking the National Association for Mental Health course.

Improvements and work completed.

A steady improvement has been maintained in the furnishing of the homes and the new ducts carrying all the main services to the female side have now been completed.

Part of one of the huts of the Emergency Hospital has been converted into a bungalow and is now occupied by one of the farm hands, and the programme of re-wiring and providing all the homes with hot-plates and geysers has been making steady progress.

We now have television sets in three of the homes and these are greatly appreciated by the residents.

Farms.

Mr. H. Harford retired from the service after completing 31 years as Farm Bailiff. He has left with all our good wishes and with the knowledge that over that period he has done an excellent job of work.

Mr. H. Holt was appointed his successor and took over his duties on the 1st April, 1953. He is already proving his worth as a practical farmer and we would like to wish him every success in the future.

I would like to conclude by again thanking the Matron, the Secretary, the Steward, the Head Male Attendant and all other members of the staff for the support which they have given me during the past 12 months.

DR. GARRETT MEMORIAL HOME.

The Home, which contains 130 effective beds, affords recuperative, seaside convalescence for Manchester children between the ages of two and 15 years.

The sources from which children are referred to the Home are, the School Medical Service, Maternity and Child Welfare centres, City hospitals and general medical practitioners. The majority of those admitted suffer from physical and/or nervous debility, some form of disease of the respiratory system, or anaemia.

Children are conveyed between Manchester and the Home, in Conway, North Wales, by chartered omnibus once each week. Admissions numbered 865 compared with 759 in 1952. Of the 865 children discharged, 736 were discharged as "fit", 113 as "improved", and 16 as "requiring further hospital treatment"; 849 gained weight during their stay, whilst in the case of the remaining 16, no changes in weight were perceived.

The highest number in residence was 138 and the lowest 80; the average number maintained was 116.1; it is estimated that another 2.9 could be added to the latter figure in respect of children taken home by their parents prior to discharge date; 265 children were "discharged" in such circumstances.

There were 2 instances of children leaving the Home without permission compared with 5 last year. In the first instance, a boy of 15 years influenced younger boys to accompany him on a tour of the surrounding district; they usually returned to the Home at 7.0 p.m. after staff had been searching for them for over five hours. In the second instance, a boy, clad only in his trousers and slippers, departed whilst his mother was visiting him; he was brought quite near to the Home by a member of the staff.

Disease among children, requiring nursing care in the Home, included 15 cases of tonsillitis, infected throats or feverish colds, 33 cases of chicken pox, 1 child developed scarletina and were transferred to the local isolation hospital. 4 children were transferred to the local general hospital; 2 had slight tonsillitis, 1 for tonsil and adenoid operation and 1 for "observation".

All the sick children recovered satisfactorily.

The recruitment of qualified nursing staff has again been very poor. Miss Nuttall, Assistant Matron, left on the 17th April, 1953, to be married. She occupied the positions of Staff Nurse, Sister, and Assistant Matron during 12 years of service and was a great asset to the Home. Miss D. Owen, who was promoted to Assistant Matron on the 1st April, 1953.

The staff of three wardens continue to provide and arrange entertainments for the children by organising outdoor activities during the summer months; handicrafts and indoor games are arranged during inclement weather during winter evenings; cinema shows have been a weekly feature much enjoyed by the children.

This is the first year of children being admitted weekly, hence the larger number of children admitted as compared with the previous year which was divided into 8 months of fortnightly admissions and 4 months of weekly admissions.

No major alterations or additions have been performed during the year. Repairs to buildings, and the preservation of interior and exterior decoration has been carried out satisfactorily.

MUNICIPAL HOSTELS

Walton House, Harrison Street, Ancoats.

Walton House is a registered common lodging house for men and accommodate 464 persons in separate cubicles. During 1953 the Hostel, as in past years, provided excellent service to the men who use this class of accommodation and it was fully booked throughout the year; numerous requests for accommodation had to be refused.

Increased operating costs caused advances in certain charges for the service provided at the Hostel and the following charges applied as from 28th March 1953:—

Rent of cubicle	2s. 3d. a night or 14s. a week.
Bath	2d. (soap and towel provided).
Lockers, small	6d. for six months.
,, large	1s. for six months.
Parcels	1d. a week.
Early calling	1d. a night or 4d. a week.

An offer was received, and gratefully accepted, from a private firm in the City to loan, free of charge, a television receiver on Coronation Day and this proved to be a most successful form of entertainment; so much so, that, with the approval of the Health Committee, the residents' Social Sub-committee purchased from their own funds a projector-type television receiver with a 4ft. by 3ft. screen. This was placed in the smoke-room for the entertainment of all residents. The Social Sub-committee also purchased several sets of dominoes and draughts for use by all residents. In addition, several concerts were given by local voluntary organizations and all of these were well attended and greatly appreciated.

The catering section enjoyed the continued excellent patronage of the residents throughout the year and continued to provide supplies of groceries and meat for purchase by the residents.

The laundry service for residents and certain Corporation departments was continued and work was completed as follows:—

- Health Department—Ashton House municipal hostel for women.
- Markets Department.
- City Architect's Department.

Ashton House, Corporation Street.

This Hostel, which is a registered common lodging house for women, provides accommodation for 210 persons in separate cubicles. The number of users of the Hostel was slightly less than in previous years, the daily average being 172, as compared with 179 in 1952. Enquiries have failed to reveal a particular reason for this decrease as regular residents who normally leave to take up domestic work during the summer months have returned to the Hostel and the decrease, therefore, in the main, could be attributed only to casual lodgers.

Daily averages of residents in recent years were as follows:—

Year	1953	1952	1951	1950	1949	1948
Daily average	172	179	180	191	184	182

The electrical installation of the Hostel is being rewired, following inspections by the Fire Prevention Officer of the Manchester City Fire Brigade who reported that the original wiring constituted a fire hazard. It is expected that the work will be completed by March, 1954.

On Coronation Day, a television receiver was loaned to the Hostel by a private firm in the City and this was very much appreciated by all the residents.

As in past years the catering section continued to be well patronized, most of the business being conducted through the grocery shop although cooked meals were still supplied on demand.

Increased operating costs caused advances in certain charges at the Hostel from 28th March, 1953, the following charges were applied for the various services provided:—

Rent of cubicle	2s. a night or 12s. 3d. a week.
Bath	2d. (soap and towel provided).
Lockers, small	3d. for six months.
" large	6d. for six months.
Parcels	1d. a week.

Section 2

Nursing Services Division

DOMICILIARY MIDWIFERY
INCIDENCE OF BLINDNESS
CARE OF MOTHERS AND YOUNG CHILDREN
DENTAL CARE
HEALTH VISITING
REGISTRATION OF NURSING HOMES
DAY NURSERIES
TUBERCULOSIS
EPILEPSY AND CEREBRAL PALSY
HOME NURSING
CONVALESCENCE
HOME HELP SERVICE
FAMILY WELFARE SERVICE
VENEREAL DISEASES

MATERNAL AND CHILD HEALTH SERVICES.

Dr. Alice I. Burke, Senior Medical Officer
(Nursing Services).

AFF.

Medical—

Winifred A. Kane, M.R.C.S., L.R.C.P., D.P.H.(LOND.), Senior Medical Officer (resigned 15th March, 1953).

Alice I. Burke, M.B., CH.B., D.P.H., Senior Medical Officer (appointed 16th March, 1953).

Veronica May Bowman, M.B., CH.B., (appointed 2nd December, 1953)

Muriel Jane Brayshay, M.B., CH.B.

Maureen Corcoran, M.B., CH.B., B.A.O., L.M. (appointed 2nd February, 1953)

Annie Margaret Dawson, B.SC., M.B., CH.B., D.C.H., D.O.

Harold Diggles, M.B., CH.B.

Florence Maud Duckworth, M.B., CH.B.

Rosaline Howat, M.B., CH.B.

Gwendoline Mary Elsie Keevil, M.B., B.S., D.C.H.

William Lees, M.B., CH.B., M.R.C.S., L.R.C.P., D.OBST. R.C.O.G. (appointed 1st June, 1953)

Helen Elizabeth Mair, M.B., CH.B.

Lydia McMurdo, L.R.C.S., L.R.C.P.

Barbara Joyce Nathan, M.B., CH.B., M.A., D.OBST. R.C.O.G.

Dorothy Elizabeth Margaret Thomas, M.B., CH.B., D.OBST. R.C.O.G.

Alice Ruth Eveline Widdows, M.B., CH.B., D.OBST. R.C.O.G. (appointed 2nd December, 1953)

Medical Officers.

Nursing—

Eileen A. Lamb, S.R.N., S.C.M., M.T. DIPLOMA—Non-Medical Supervisor of Midwives.
Evelyn L. Gowing, S.R.N., S.C.M., H.V. CERT.—Superintendent of Health Visitors.

Day—

Charles A. Hay, M.B.E., Chief Administrative Assistant.

DOMICILIARY MIDWIFERY SERVICE.

The staff establishment of domiciliary midwives comprises a non-medical supervisor and 2 assistants, 67 district midwives, 6 special maternity nurses, of whom are employed by the local authority. In addition there are 12 domiciliary midwives employed in St. Mary's Hospital Extern Service and 12 midwives in the service of the Manchester District Nursing Institution. These two bodies employ midwives on an agency basis on behalf of the City Council.

Supervision of midwives (Midwives Acts).

Notices of intention to practise were received during 1953 from 273 midwives and 5 maternity nurses. 107 notices were from municipal midwives employed on an agency basis, 163 were from midwives employed in hospitals and nursing homes and 3 independent midwives gave the necessary certificates.

The number of notices of intention to practise received during 1953 compares with a total of 259 given during 1952.

The non-medical supervisors made a total of 537 supervisory visits during 1953, as follows:—

Inspections at midwives' homes	..	..	..	..	..	..	..
Visits to confinements and nursings	..	..	..	..	..	..	..
Visits to ante-natal and post-natal clinics	..	..	..	..	..	..	..
Special visits to midwives	..	..	..	..	..	..	..
Investigations, patients' homes, pyrexia, etc.	..	..	..	..	..	..	..
Hospitals and nursing homes	..	..	..	..	..	..	..
Coroner's and Magistrates' Courts	..	..	..	..	..	..	..

Training of midwives.

The City Council participates jointly with St. Mary's Hospitals in a scheme for training pupil midwives. 24 municipal midwives are approved by the Central Midwives Board for Part II district training and 31 pupils were trained by them during 1953. All the pupils passed the examination of the Central Midwives Board.

Eight municipal midwives attended post-graduate courses during 1953 at Birmingham, Bristol, Leeds and Oxford. A series of six lectures was given at Manchester during the winter months under departmental arrangements and there was an average attendance of 86 midwives.

Transport.

Motor cars are owned by 30 municipal midwives and they are reimbursed for mileage at the authorized rates.

Midwives without cars are able to obtain transport either during the day or night on application to the Health Committee's ambulance and transport depot.

Ante-natal care.

Midwives hold ante-natal clinics at 23 municipal welfare centres and made 2,815 attendances for this purpose.

The services of a medical officer are available, if required, at each centre and the attendances by patients totalled 19,960.

In addition to ante-natal care, at 5 clinics there are arrangements for post-natal examinations. Midwives made 189 attendances at clinics in connection with post-natal care.

Deliveries.

The total number of attendances at births in the City by midwives during 1953 was 13,457, of which 5,171 were home confinements attended as shown below. Attendances at births in hospitals numbered 7,290 and in private homes 996.

Attendances at domiciliary births.

Municipal midwives and midwives acting as maternity nurses		Queen's district midwives		St. Mary's district midwives	Independent midwives		Private maternity nurses
Midwives	Maternity nurses	Midwives	Maternity nurses		As midwife	As maternity nurse	
3,456	815	31	96	751	12	8	2

Of the total number of confinements in the City, the percentage of those ended at home during 1953 was less than in 1952, the respective percentages being 39.6 in 1952 and 38.4 in 1953. This may be attributed partly to an increased number of maternity beds in hospitals which became available in the latter part of 1953, largely as a result of representations by a Working Party which was set up to examine the demand for such beds and their availability.

There were 5,000 applications for the services of municipal midwives and of these 707 were cancelled for various reasons.

The average number of cases attended by domiciliary midwives employed direct or under agency arrangements by the City Council during 1953 was as follows:—

Municipal midwives	63.7
St. Mary's district midwives	62.5
Queen's district midwives	25.4

Apart from duties arising from ante-natal care and actual deliveries, other work continues to make large demands upon the services of municipal midwives.

Duties concerning the investigation of home conditions in connection with applications for hospital confinement involved 1,969 visits and there were 1,719 visits to patients discharged from hospitals before the 10th day.

Patients discharged after the 10th day are visited by health visitors as soon as possible.

Medical aid.

There were 2,252 requests for medical aid in accordance with the rules of the Central Midwives Board. Of these 181 were by midwives in maternity homes having no resident medical officer and the remainder were by domiciliary midwives. Where medical aid was requested at domiciliary confinements, in 337 cases a doctor had been booked and in 734 cases a midwife only was required.

Artificial feeding.

Recourse to artificial feeding was notified in 645 instances—134 from midwives in domiciliary practice and 511 from institutions.

Analgesia.

The number of patients who avail themselves of facilities for analgesia continues to increase.

All municipal midwives are trained in the administration of gas and air analgesia and each is supplied with the necessary apparatus.

During 1953 the number of patients who had gas and air analgesia was 2,967 compared with 2,967 in the previous year.

Chloroform was administered to 2,593 patients, of whom 2,166 were attended by municipal midwives, 394 by St. Mary's district midwives and 33 by Queen's district midwives. The total for 1952 was 2,090.

General pyrexia.

The number of cases of puerperal pyrexia notified during 1953 was 505, the rate per 1,000 total births being 40.16. This is a reduction compared with the previous year.

There were no deaths from puerperal pyrexia.

Of the 505 cases notified, 283 were puerperal sepsis, 215 puerperal pyrexia and 7 were abortions.

They may be further classified as 399 notifications relating to full term and 99 relating to premature labour.

The incidence of cases of pyrexia in the practise of midwives is shown in the following statement:—

Incidence of pyrexia.

	Municipal midwives	Midwives as maternity nurses	St. Mary's district midwives	Queen's district midwives	Institutions	Independent midwives	General practitioners no nursing attendance
A. (1) Infection of genital tract ..	9	21	38	—	215	—	—
(2) Abortions ..	—	—	—	—	3	—	4
B. Extra genital causes	6	10	22	—	140	—	—
C. Unclassified ..	2	4	6	—	25	—	—
Totals	17	35	66	—	383	—	4

232 abortions occurred which were transferred to hospital, but were notifiable under the Puerperal Pyrexia Regulations, 1951.

Maternal deaths.

There were 9 deaths during 1953 which were directly attributable to childbirth and one which was associated with childbirth. The maternal mortality rate was 0.80 compared with a rate of 0.71 in 1952.

Of the 10 patients who died, 3 were in normal full term labour, 4 in abnormal full term labour and 3 were in premature labour.

The 10 maternal deaths which occurred were due to the following causes:

- 1 (a) Shock, (b) haemorrhage, (c) Caesarean section.
- 1 (a) Accidental haemorrhage, (b) pre-eclamptic toxæmia, (c) pregnancy.
- 1 (a) Air embolism, (b) spontaneous rupture of vaginal vault, (c) forceps for maternal distress. 2. Pre-eclampsia.
- Obstetric shock due to difficult labour.
- 1 (a) Post-partum haemorrhage, (b) manual removal of retained placenta. partum haemorrhage.
- 1 (a) Renal failure, (b) concealed accidental haemorrhage.
- 1 (a) Massive air embolism, (b) ruptured uterus. 2. Pregnancy normal.
- 1 (a) Caesarean section, (b) paralytic ileus. 2. Obstructed labour.
- 1 (a) Cerebral haemorrhage, (b) toxæmia of pregnancy.
- 1 (a) Anuria, (b) bilateral cortical necrosis in puerperium.

In addition there were three other maternal deaths in Manchester but the patients residing outside the City boundary, viz. 2 in Hale, Cheshire and 1 in Accrington.

at home and

Weight at birth	Born in nursing home and transferred to hospital on or before 28th day			Premature still-births		
	Total	Died within 24 hrs. of birth	Survived 28 days	Born in hospital	Born at home	Born in nursing home
	(14)	(15)	(16)	(17)	(18)	(19)
Under 3lb. 4oz. or less (1,500 gm or less)	1	1	—	67	18	—
Over 3lb. 4oz. up to and including 4lb. 6oz. (1,500 to 2,000 gms.)	—	—	—	45	10	2
Over 4lb. 6oz. up to and including 4lb. 15oz. (2,000 to 2,250 gms.)	—	—	—	19	3	—
Over 4lb. 15oz. up to and including 5lb. 8oz. (2,250 to 2,500 gms.)	—	—	—	18	12	—
Totals	1	1	—	149	43	2

All maternal deaths occurred in hospital practice and with one exception, had been booked for hospital confinement. The exception had engaged a principal midwife but was transferred to hospital before delivery, in view of post-partum haemorrhage.

pemphigus neonatorum.

There was a decrease in the incidence of pemphigus compared with the previous year. Four cases were notified during 1953 and six during 1952. The cases occurred in hospitals and the infants were successfully nursed by special maternity nurses on discharge.

Notified cases of skin eruption.

The maternity nurses paid a total of 413 visits to 59 cases of skin infection. Visits to 39 cases were made in 1952.

Stillbirths

There were 343 notified stillbirths which represents a percentage in relation to total births of 2.70. The respective percentages for 1952 and 1951 were 2.50.

271 notified stillbirths occurred in domiciliary practice and 72 in hospitals.

Special nursing duties of maternity nurses.

Maternity nurses are employed for the care of cases of pyrexia and unsatisfactory conditions of mother or infant which it is considered desirable for midwives to attend. They also attend to any further care needed in maternity cases discharged from hospital.

The following summary of visits gives particulars of their work.

Visits by maternity nurses.	
Reason for visit	No. of visits
Notified cases of puerperal pyrexia (nursings)	639
Unsatisfactory conditions of mother	2,575
Abortion	288
Infection in the home	12
Unsatisfactory condition of infant	332
Unsatisfactory skin conditions	413
Immature infants	355
Ophthalmia neonatorum, etc... .. .	196
Puerperal pyrexia and other special investigations	181
Total	<u>4,991</u>

Premature babies.

Three specially trained nurses are employed for the care of premature infants in their own homes.

They were responsible for the care of 426 infants during 1953. 290 premature infants were referred by hospitals, 41 by nursing homes and the remainder by domiciliary midwives.

When the nurses ceased to attend, 82 infants were wholly breast fed, 10 were on breast and complementary feed, and 296 were artificially fed.

Neo-natal mortality rate of premature infants according to birth weight.

Weight	Survived	Died	Total	Mortality per cent
Under 3 lb.	10	1	11	100
3—4 lb.	58	—	58	—
4—5 lb.	197	—	197	—
5 lb. plus	159	1	160	0.6
Total	424	2	426	

Provision of cots.

Specially prepared and heated cots for premature infants are available in the home on application by doctor or midwife and were in use on several occasions during the year.

Ophthalmia neonatorum and other eye conditions.

Three ophthalmic trained nurses are employed for the care of all eye cases referred to the Department.

The sources of reference of such cases is shown in the accompanying table.

Cases of ophthalmia neonatorum and conjunctivitis in newly-born infants and eye defects in older children.

	Legitimate	Illegitimate
1. Ophthalmia neonatorum—		
(a) Notified by medical practitioners	53	2
(b) Notified by the Royal Eye Hospital	—	—
2. Conjunctivitis in newly-born—		
Reported by midwives :		
(a) Own cases	283	5
(b) Discharged from hospital before 14th day	54	2
3. Conjunctivitis and other eye defects in children over 14 days—		
(a) Reported by medical officers of child welfare centres	88	4
(b) Reported by health visitors	316	13
Total number of cases	797	26

1 cases attended the Royal Eye Hospital for treatment (10 as in-patients, out-patients) and 752 cases were attended by private doctors.

There were no cases of corneal infection.

One of 16 swabs taken proved positive—G.C.

Of the 823 cases referred to the Department, 755 were reported to have recovered, 1 died, and 67 were still under treatment at the end of the year.

Ophthalmic nurses paid 823 primary and 5,293 subsequent visits during the year, a total of 6,116.

Analysis of eye conditions of children over 14 days referred by health visitors and child welfare centres

	Brought forward from 1953	New cases	Carried forward to 1954
Conjunctivitis (simple)	3	269	85
Conjunctivitis (purulent)	1	18	1
Nasal obstruction	5	85	3
Cystitis	—	12	—
Cataract	3	1	4
Glaucoma	4	2	4
Strabismus (congenital)	—	20	—
Strabismus (traumatic)	9	6	15
Microphthalmia	2	—	—
Myopia	2	—	2
Chalcosis	16	6	18
Leucocoria	4	1	3
Chalcosis	4	—	4
Microphthalmia	3	—	1
Microphthalmia	2	—	—
Microphthalmia	1	—	—
Microphthalmia	1	—	1
Microphthalmia	19	—	—
Microphthalmia	3	—	18
Microphthalmia	1	—	3
Microphthalmia	1	—	1
Microphthalmia	1	—	1
Microphthalmia	—	1	1
	84	421	85

One case of retrolental fibroplasia died aged 10 months as a result of an

INCIDENCE OF BLINDNESS

(National Assistance Acts)

The information contained in Part A of the following statement, which in the form requested by the Minister of Health, has been supplied by the Chief Welfare Officer of the City Council's Welfare Services Department.

A.—Follow-up of registered blind and partially sighted persons, 1953.

	Cause of disability		
	Cataract	Glaucoma	Retrolental fibroplasia
(i) Number of cases registered during the year in respect of which paragraph 7 (C) of Forms B.D.8 recommends:—			
(a) No treatment	60	15	—
(b) Treatment (medical, surgical or optical)	29	10	—
(ii) Number of cases at (i) (B) above which on follow-up action have received treatment . .	11*	10	—

* A further 9 cases have attended the Eye Hospital and are now on the waiting list for operations.

B.—Ophthalmia neonatorum

(i) Total number of cases notified during the year . .	55
(ii) Number of cases in which:—	
(a) Vision lost	Nil
(b) Vision impaired	Nil
(c) Treatment continuing at end of year	Nil

Cases of retrolental fibroplasia among premature infants—

Number blinded by glaucoma who had not received treatment—

CARE OF MOTHERS AND YOUNG CHILDREN.

Welfare centres.

The Health Committee provides 26 welfare centres for mothers and children in various parts of the City. In addition there is a voluntary centre at the Name School.

Many welfare centres are held in hired halls which are not entirely satisfactory for the purpose. There are difficulties in securing alternative premises, but the question of accommodation is kept under continuous review.

The Health Committee have been concerned at the lack of clinic facilities in the Brooklands and Woodhouse Park districts of Wythenshawe, where considerable housing development is in progress. Steps have been taken to provide premises for the purpose, which will also afford accommodation for day clinics.

Weekly clinics are provided as follows :—

Infants	69
Toddlers	25
Ante-natal	37

Medical officers attend all sessions except 9 infant clinics which are taken by health visitors only and 3 ante-natal clinics where midwives are in attendance. In ante-natal clinics both doctors and midwives attend. Two centres provide treatment for venereal diseases in mothers and young children. Ante-natal examinations are undertaken at ante-natal clinics.

therapy.

Physiotherapy was provided at 21 centres during 1953.

Difficulties continue to be experienced in recruiting qualified physiotherapists to fill vacancies in the establishment and as a result the service given is not so extensive as is considered desirable.

Physiotherapy includes remedial exercises for children of 2 to 5 years who have congenital defects, minor deformities and either general or local poor muscular development.

Pre-natal and post-natal exercises are provided to improve the condition of mothers before and after confinement.

Treatment by artificial sunlight is afforded at five welfare centres for mothers suffering from various discomforts of pregnancy and others with post-natal debility and rheumatism. Children receive treatment for measles, boils, asthma, rickets, anaemia, malnutrition and spastic paralysis.

Home science classes.

Home science classes have long been a feature in municipal welfare centres and instruction in the preparation of meals and food values was given at 12 centres.

Home science classes were provided at 12 centres during 1953.

Attendances, etc.

Attendances at sessions held during 1953 with comparable figures for were as follows :—

	31st December, 1953	31st December
Infant and toddlers' sessions:—		
Number of children on centre registers—		
Under 1 year	6,307	6,015
1 to 2 years	4,535	4,46
2 to 5 years	7,061	7,28
Total	17,903	17,77
Attendances made by children:—		
Under 1 year	104,537	102,03
1 to 2 years	21,313	23,18
2 to 3 years	13,243	13,75
3 to 4 years	9,132	10,21
4 to 5 years	6,279	7,15
Total attendances ..	154,504	156,35
Ante-natal sessions.		
Number of new attenders	6,914	7,15
Total number of attenders	9,467	9,74
Number of attendances	39,974	41,84
Post-natal sessions.		
Number of attenders	598	71
Number of attendances	608	1,03
Physiotherapy sessions.		
Ante-natal exercises:—		
Number of attendances	2,820	2,6
Post-natal exercises:—		
Number of attendances	347	5
Artificial sunlight treatment:—		
Number of attenders—		
Children	737	7
Adults	2	
	} 739	

Minor ailments.

207 children under five years of age were referred by the medical at welfare centres to school clinics for the treatment of minor ailments. C who fail to attend or cease attending before treatment is comple " followed-up " by health visitors who stress the desirability of treatment

The type of ailment and number of children referred for treatment is below.

Number of children referred for treatment of minor ailments.	
Squint	117
Other eye affections	17
Otorrhoea	13
Other ear affections	4
Impetigo	35
Other skin affections	1
Miscellaneous	20

dried milk and vitamised foods.

Facilities are afforded to the Ministry of Food in all welfare centres for the distribution of National dried milk, cod liver oil, orange juice, etc. Proprietary brands of dried milk are also sold to mothers at the welfare centres and are supplied free in necessitous cases on the recommendation of the centre medical officer.

The dried milk supplied free during 1953 was £180. 2s. 0d. in value.

Voluntary workers.

42 voluntary workers made 1,363 attendances at welfare centres during the year and their useful assistance is greatly appreciated.

Mothercraft teaching exhibition.

The mothercraft teaching exhibition is used for demonstration purposes during talks given by health visitors at welfare centres or for evening lectures. The general contents are:—

- (a) Nutrition—models of diet and posters referring to the expectant mother, weaning tray and posters, diets for children 2 to 5 years, models and posters showing food values, etc.
- (b) Child health—growth and development, dentition models, prevention of disease, nursing of cases of infectious disease.
- (c) Development through play—sense training, toys and posters for children aged 6 months to 5 years.
- (d) Clothing—knitted first set, clothes for children aged 6 months to 5 years.
- (e) Prevention of accidents—in the home and on the road, models of kitchen, garden, bathroom, bedroom, posters, etc.

This portion of the exhibition has been in great demand.

The exhibition also includes examples of work done by mothers attending mothercraft classes at welfare centres, and at the Health Committee's welfare centre, Knowle House, where they are given a working knowledge of colour design and advice and help in home decoration. Instruction is given in bookbinding, embroidery, handloom weaving, leatherwork, glove making, basket making, etc.

The sale of clothing patterns at welfare centres has decreased from 1,251 patterns in 1952 to 808 in 1953. Excellent patterns are now available in shops and several types of cut-out patterns have therefore been discontinued.

Where mothers need practical help in making clothes they are urged to attend the sewing classes held at welfare centres.

Mothers' evening clubs.

Mothers' evening clubs at Cheetham and Northenden Maternity and Child Welfare Centres have continued with the approval of the Health Committee.

The object of these clubs is to allow mothers who normally attend the welfare centres to meet in the evenings once a fortnight in a happy social atmosphere whereby promoting a spirit of friendliness and cordiality. The activities of these clubs are educational and social and include—talks; discussions, various demonstrations of a practical instructive nature, i.e. washing machines, sewing machines, cookers, vacuum cleaners, etc.; social evenings; film show; home visits; picnics and Christmas parties, and this year special Coronation parties for the children were arranged. Both clubs have their own library and publish a news bulletin.

The committees and honorary officers are elected from the mothers.

The number of enrolled members is 66 at Cheetham and 62 at Northenden.

Contact is made between members of the two clubs by an interchange of visits.

Children attending child welfare centres, 1953.

Centre	On register, January 1st 1953			New attendances during 1953			On register January 1st 1954		
	0-1 year	1-2 years	2-5 years	0-1 year	1-2 years	2-5 years	0-1 year	1-2 years	2-5 years
Abby Hey	239	180	367	331	24	105	269	190	
Ancoats	98	79	85	130	21	30	87	56	
Ardwick	248	179	316	357	38	136	262	130	
Blackley	148	129	251	205	21	60	163	120	
Burnage (Duchess of York)	124	94	87	239	12	14	179	114	
Cheetham	223	156	254	293	56	173	227	145	
Chorlton-on-Medlock	226	138	145	290	71	107	230	147	
Chorlton-cum-Hardy	292	251	388	414	44	152	293	242	
Clayton	157	117	101	246	29	73	184	124	
Collyhurst	332	188	361	452	44	227	345	199	
Crumpsall	147	149	163	193	19	30	141	125	
Didsbury	247	168	308	258	28	69	204	184	
Gorton	310	191	228	402	33	105	305	176	
Harpurhey	236	179	278	330	24	124	246	168	
Higher Blackley	114	82	88	176	16	38	145	102	
Holy Name	53	42	55	143	29	49	104	80	
Hulme	142	110	209	235	62	127	182	115	
Levenshulme	304	246	489	460	46	194	346	241	
New Moston	197	158	135	259	24	61	210	133	
Newall Green	362	272	615	467	94	422	323	288	
Newton Heath	231	194	363	314	33	134	245	197	
Northenden	254	203	476	406	86	262	308	241	
Openshaw	312	201	193	415	71	148	304	222	
Rusholme	342	242	434	470	65	180	307	254	
Sharston	259	158	331	312	43	169	228	194	
Hart Road, Fallowfield	148	126	199	198	22	46	146	125	
Withington	274	235	369	418	40	150	319	223	
Totals	6,019	4,467	7,288	8,413	1,104	3,385	6,307	4,535	
Totals 1952	6,194	4,374	7,141	8,341	1,186	4,083	6,019	4,467	

Nurseries and Child Minders Regulation Act, 1948.

At the end of the year there were 3 persons registered as child minders for a total of 26 children. No person applied for registration during the year and one person requested her name to be removed from the register.

Two factory nurseries are registered under the Act and they provide accommodation for 60 children.

One voluntary nursery is also registered under the Act with accommodation for 40 children. The City Council subsidises the maintenance of this nursery under powers contained in Section 22, National Health Service Act, 1948.

Day minded children.

Unless a person concerned expresses a wish to be registered under the Act, that person is not registered unless she looks after three or more children. The number of such approved day minders is 3. The number of children with the day minders is 6.

All persons and premises registered under the Act are visited regularly by a medical officer and a health visitor on the staff of the Department and a health visitor makes routine visits to all children under 5 years of age who are known to be day minded.

Care of illegitimate children and their mothers.

A health visitor specially appointed for the purpose is responsible for medical and social work concerning the care of illegitimate children and their mothers. She receives part-time assistance as required from the general health visitor staff. Her duties include investigation and advice and arrangements for admissions to the Health Committee's hostel at Knowle House, Handforth.

The sources of reference of the cases concerned are officers of the Health, Children's and Welfare Services Departments, hospital almoners, general medical practitioners, and social workers of voluntary organisations. There is close liaison with field workers and others connected with moral welfare organisations in the City. These moral welfare organisations receive a *per capita* grant from the City Council in respect of cases with which they deal.

The following particulars indicate the work of the staff during the year and are compared with the previous year.

	1953	1952
(1) Office interviews	1,155	1,093
Home visits	555	591
Visits to hospitals	77	69
Visits to Knowle House	76	62
Visits to Mayfield House	3	3
Visits to hostels of voluntary organisations	3	5
Interviews—social workers and health visitors	647	568
Attendances at Magistrates' Courts	88	81
Total visits and interviews	<u>2,604</u>	<u>2,472</u>
(2) Health visitors' records dealt with	3,093	4,148

(3) Number and classification of persons dealt with during the ante-natal period with results of confinement:—

	Live births	Births pending	Still-births	Mis-carriages	Total
.. .. .	143	41	4	—	188
.. .. .	32	12	—	1	45
.. .. .	6	—	—	—	6
.. .. .	8	3	—	—	11
married before birth of baby	—	7	—	—	7
removed	—	16	—	—	16
Totals	189	79	4	1	273

(4) Number of mothers dealt with who have had illegitimate children—
697.

(5) Illegitimate children:—

Total number dealt with by the Welfare Officer—905, comprising

224 children of mothers seen in post-natal period only.

189 children of mothers seen in ante-natal period during 1951

49 children of mothers seen in the ante-natal period during 1952.

443 children whose cases were reinvestigated or carried forward from previous years.

Particulars of illegitimate children remaining with their mothers.

Mothers	In lodgings or absorbed into family	With mother and putative father	With mother in a hostel	Parents subsequently married	Removed from Manchester	No trace	Deaths
Single	385	76	6	17	21	10	4
Married	112	47	—	—	1	3	1
Widow	14	4	—	1	—	—	—
Divorcee	16	2	—	2	2	—	2
Totals	527	129	6	20	24	13	7

Particulars of illegitimate children apart from their mothers.

Mothers	With adopters	With relatives	With foster mothers	Boarded out by Children's Committee	In residential nurseries (private)	In residential nurseries (Children's Committee)
Single	45	30	25	9	10	18
Married	5	11	4	3	4	1
Widow	4	—	—	—	—	1
Divorcee	3	1	1	—	—	4
Totals	57	42	30	12	14	24

The action taken by the Welfare Officer as regards cases referred to the Department was as follows:—

Accompanied mothers and babies and expectant mothers to hostels, hospitals and residential nurseries 83

Admissions arranged to—

Knowle House Hostel 98

Voluntary hostels 21

Hospitals 21

Ante-natal care arranged 21

Cases referred to—

Children's Department	101
Welfare Services Department	11
Mental Health Service	10
Poor Man's Lawyer Association	8
National Assistance Board	48
Probation officers	5
Catholic Moral Welfare Council	28
Catholic Adoption Society	38
Diocesan Council for Moral Welfare	13
Manchester and Salford Methodist Mission	9
National Society for the Prevention of Cruelty to Children	11
Manchester Employment Exchange	16
Manchester and District Adoption Society.. .. .	13
Day Nursery Service	7

Assistance given—

To obtain legal advice	9
To obtain a vacancy in a day nursery	20
To find lodgings	8
To find a foster mother	4
To secure employment	6
Provision of perambulators and cots from departmental sources	7
Provision of clothing from departmental sources.. .. .	40
Provision of clothing from voluntary sources	29
Provision of clothing from National Assistance Board	20

Advice given re—

Affiliation orders	126
National Health Insurance benefit	88
National Assistance	74
Hostel accommodation	120
Institutional accommodation	11
Private residential nursery accommodation	16
Adoption	160
Day nurseries	83
General matters	170

ular visits were paid to 77 families requiring close supervision.

on order cases.

applications for affiliation orders were heard by the Manchester Magis-Court and were dealt with as shown:—

Assistance given by	Orders granted
Welfare Officer	43
Welfare Officer and Poor Man's Lawyer Association	3
Welfare Officer and National Assistance Board	12
Welfare Officer and private solicitors	3
Totals	61

Mother and Baby Home, "Knowle House," Handforth.

The primary reasons for admission to this home, which is administered by the Health Committee, are:—

- (a) Mother and baby homeless, either because prior to her confinement the mother had been living in an institution, hostel or lodging house, or because she had been engaged in residential employment.
- (b) Relatives unwilling to allow the mother to return home with her illegitimate baby.
- (c) Overcrowded or unsatisfactory home conditions.

The Welfare Officer arranges for the admission of mothers and babies to the home and is responsible for making suitable arrangements for them on discharge.

On the 1st of January, 1953, there were 8 mothers and 8 babies and 1 expectant mother in "Knowle House" and from this date to 31st December 1953, 78 mothers were admitted with their babies (including twins), also 1 expectant mother and 2 convalescent mothers, making a total of 86 mothers and 87 babies, 19 expectant mothers and 2 convalescent mothers were discharged, leaving 5 mothers, 5 babies and 2 expectant mothers in the home at the end of the year. The average stay was 7 weeks.

The following particulars show the arrangements made for the care of 82 babies discharged from "Knowle House":—

Babies remaining with mother—

In home of relatives	14
In residential domestic employment	2
In lodgings	11
In institutional accommodation	6
In hospital	1

Babies apart from mothers—

In homes of adopters	28
In private residential nurseries	6
In the care of the Children's Committee	5
In homes of foster mothers	7
In hospital	2

Recuperative centre.

By arrangement with the Community Council of Lancashire, mother and children are admitted to the Brentwood Recuperative Centre, Marple, Cheshire, on recommendations of the Maternity and Child Welfare Section, the cost of maintenance being borne by the Health Committee. Since 5th July, 1953, provision for these arrangements has been made in the City Council's scheme for prevention of illness, care and after-care under Section 28 of the National Health Service Act, 1946.

Admission to the Centre during 1953 comprised 16 mothers whose ages were from 21 years to 39 years, 5 children under 1 year and 37 children under 1 to 7 years.

In addition, after special requests from doctors at various hospitals and child welfare centres, 4 mothers and 4 children were admitted to Sefton House, Pensarn, for special periods averaging about two weeks, also 14 children for the same reason were admitted to Sefton Convalescent Home, Birkenhead, for various periods, ranging up to two months.

One family, after a special request, remained at Brentwood for six weeks, and the other four families stayed for the full period normally allowed, which is four weeks.

The four primary reasons for recommending the mothers for admission to Brentwood are:—

- (1) Lack of training and experience in housewifery and child management.
- (2) Ill-health and lowered vitality, due to too-rapid child-bearing, depressing surroundings and environment and, possibly, in the case of some mothers, malnutrition.
- (3) Unsatisfactory home conditions, including lack of domestic facilities.
- (4) Difficulties between parents, causing the mother to lose interest in her home and children.

Marked improvement in both mental and physical condition of the family is evident after a stay in Brentwood. In most cases the mothers look more alert and happy, find pleasure in household tasks, and the children benefit greatly from the training given in the Centre. By frequent visits from the health visitor it is hoped to maintain and still further improve the standard of living of these families.

DENTAL CARE OF MOTHERS AND YOUNG CHILDREN.

(Senior Dental Officer—James Byrom, L.D.S.)

The provision of dental care for mothers and young children attending child welfare centres is made obligatory on the local health authority by the National Health Service Act, 1946, Section 22.

In January of this year arrangements were completed with the Education Committee for part use of the school dental staff and premises in five districts of the City. Prior to this the Committee had part-time dental sessions only at child welfare centres in Cheetham and Chorlton-on-Medlock and these are still carried on; now, dental treatment is available at centres in Moston, Fenshulme, Northenden, Chorlton-on-Medlock (two), Cheetham and Hulme.

Patients are referred by the doctors at child welfare centres by completing forms which incorporate a certificate of fitness for general anaesthesia in a dental chair. Arrangements are elastic enough to permit of almost immediate treatment of urgent cases.

The scheme started smoothly and there is now no long waiting list for dental attention and patients have the opportunity of comprehensive treatment, including general anaesthesia and the fitting of dentures; these latter are made at the Dental Laboratory in Shakespeare Street, Chorlton-on-Medlock. Thus, the whole treatment is now in the hands of the Committee's professional staff.

In some ways the first few years of a new scheme such as this may be expected to practice building and goodwill has to be fostered. The antipathy or even hostility to preventive and conservative treatment has to be overcome if this is not done overnight.

More surgery accommodation is needed in the north of the City and in the Fenshulme area.

The Committee has agreed with the Education Committee to the appointment of a dental hygienist who will work in the Shakespeare Street premises. It is hoped that this expansion of the Service will take place in April, 1954.

No clinical research has been undertaken by the dental staff.

Statistical details of dental treatment given are shown below :—

(a) Numbers provided with dental care.

	Examined	Needing treatment	Treated	Maternal dental
Expectant and nursing mothers ..	569	559	681	173
Pre-school children	1,812	1,735	1,783	900

(b) Forms of dental treatment provided.

	Extractions	Anaesthetics		Fillings	Scalings or scaling and gum treatment	Silver nitrate treatment	Dressings	Radio-graphs	Dentures provided
		Local	General						Complete
Expectant and nursing mothers ..	1,131	75	48	101	84	1	30	—	37
Pre-school children	860	109	214	258	—	4,582	18	—	—

HEALTH VISITING.

Health visitors are concerned with the nutrition and development of children under school age, the health and welfare of their mothers and their education, including the teaching of mothercraft. They have had additional duties since the advent of the National Health Service Act, 1946, and their responsibilities now include advice and assistance to all members of the family.

The enlarged scope of a health visitor's duties is particularly reflected in the example in work connected with aged and infirm persons and the after-care of discharged hospital patients, which continued to expand during 1953.

In December, 1953, the health visitors had under observation 63,698 children under 5 years of age.

Notification of births.

The total number of notifications adjusted by transfer was 12,518, comprising 12,175 live births and 343 still-births.

Total registered births numbered 12,573 and of these 800 were illegitimate.

It has been possible in 11,646 births (11,337 live births and 309 still-births) representing 93 per cent. of the total registered births in the City, to consider the place in the family of each birth, and this is shown in the following table.

Full-time and premature births have been separated, the standard birth weight of 5½ lbs. or under having been adopted in 1938.

Place in family	Live births				Still-births				Live and still-births			
	Legitimate		Illegitimate		Legitimate		Illegitimate		Still-births			
	Full time	Pre-mature	Full time	Pre-mature	Full time	Pre-mature	Full time	Pre-mature	1953		1952	
									Per cent.	Per cent.	Per cent.	Per cent.
1st	3,246	287	234	39	43	47	5	7	33.01	33.01	39.18	33.55
2nd	2,885	207	127	20	32	41	1	3	24.92	24.92	19.75	28.47
3rd	1,717	119	91	5	23	24	—	2	15.87	15.87	15.99	17.01
4th	949	74	60	5	21	12	—	—	10.68	10.68	9.40	9.63
5th	464	39	27	6	13	5	1	2	6.14	6.14	6.58	4.77
6th	276	30	18	4	7	5	1	—	4.86	4.86	3.77	2.95
7th	161	9	11	—	5	3	—	—	2.58	2.58	1.88	1.62
8th	71	13	4	1	—	1	—	—	.65	.65	1.57	.78
9th	41	6	6	1	—	1	—	—	.32	.32	1.57	.47
10th	31	4	3	—	—	—	—	—	—	—	—	.34
11th	14	2	—	—	—	—	—	—	—	—	—	.14
12th	12	2	3	—	—	—	—	—	—	—	—	.15
13th	5	—	—	—	—	—	—	—	—	—	—	.11
14th	4	1	—	—	2	—	—	—	.65	.65	—	.31
15th	1	—	—	—	—	—	—	—	—	—	—	.15
16th	—	—	—	—	—	—	—	—	—	—	—	.04
17th	—	—	—	—	—	—	—	—	—	—	—	.05
18th	—	—	—	—	—	—	—	—	—	—	—	.01
19th	—	—	—	—	—	—	—	—	—	—	—	.01
20th	—	—	—	—	—	—	—	—	—	—	—	—
21st	—	—	1	—	—	—	—	—	—	—	—	—
Totals . . .	9,878	793	585	81	146	140	9	14	100.00	100.00	100.00	100.00

11,337

309

11,646

It is interesting to compare the size of the average family and the age of mother of each new investigated birth in 1953 as compared with 1935 when the analysis was first made. Tables for these two years are as follows:—

(1) Age of mothers at birth of children during 1953 showing place in family of each birth

Age groups Years	Place in family																		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	21	
15—	402	67	3	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	
20—	1,769	930	307	100	15	7	1	—	—	—	—	—	—	—	—	—	—		
25—	1,118	1,199	710	370	131	61	29	8	3	3	—	1	1	—	—	—	—		
30—	451	823	627	382	210	131	69	29	12	5	2	2	—	—	—	—	—		
35—	136	228	256	206	139	94	62	35	18	15	11	10	4	3	—	1	—		
40—	32	61	71	55	56	44	25	19	20	14	3	4	—	2	1	—	1		
45—	—	4	6	6	3	5	1	—	2	2	—	2	—	—	—	—	—		
50—	—	—	1	1	—	1	2	—	—	—	—	—	—	—	—	—	—		
	3,908	3,312	1,981	1,121	555	343	189	91	55	39	16	19	5	5	1	1	—		

(2) Age of mothers at birth of children during 1935 showing place in family of each birth

Age groups Years	Place in family																
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
15—	204	25	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
20—	1,617	718	184	39	9	1	1	—	—	—	—	—	—	—	—	—	—
25—	1,419	1,054	540	253	97	44	19	2	2	—	—	—	—	—	—	—	—
30—	489	627	486	337	207	140	74	50	17	7	5	1	—	—	—	—	—
35—	118	288	235	104	159	132	111	88	65	30	10	6	4	1	2	—	—
40—	18	40	50	68	69	53	53	40	31	32	18	6	7	5	1	1	1
45—	—	2	—	5	9	6	4	1	6	7	5	5	4	3	1	—	—
	3,955	2,754	1,496	896	550	376	262	181	121	76	44	18	15	9	4	1	1

The 1953 births are further analysed to show the difference between legitimate and illegitimate births, and live and still-births.

Age of mothers at birth of live children during 1953.

(A) Place in family of each investigated birth (legitimate).

Place in family																Total births
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
327	59	2	1	1	—	—	—	—	—	—	—	—	—	—	—	390
1 616	865	288	94	14	7	1	—	—	—	—	—	—	—	—	—	2,880
1,016	1,138	657	342	116	55	27	8	3	3	—	1	1	—	—	—	3,397
404	760	588	339	194	120	63	26	10	4	2	1	—	—	—	—	2,520
118	206	237	190	126	81	53	32	16	15	11	8	4	3	—	1	1,101
22	51	63	51	40	39	23	18	17	12	3	3	—	2	1	—	354
—	3	5	5	3	4	1	—	1	1	—	1	—	—	—	—	24
—	—	1	1	—	—	2	—	—	—	—	—	—	—	—	—	4
3,533	3,031	1,836	1,023	503	306	170	84	47	35	16	14	5	5	1	1	10,670

(B) Place in family of each investigated birth (illegitimate).

Age groups Years	Place in family													Total births	
	1	2	3	4	5	6	7	8	9	10	11	12	21		
1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
67	5	1	—	—	—	—	—	—	—	—	—	—	—	—	73
110	51	17	4	—	—	—	—	—	—	—	—	—	—	—	182
47	34	35	18	13	4	1	—	—	—	—	—	—	—	—	152
28	38	25	31	11	7	4	3	2	1	—	—	—	—	—	150
14	13	12	11	6	8	4	2	1	—	—	1	—	—	—	72
6	5	5	1	3	3	2	—	3	2	—	1	1	—	—	32
—	1	1	—	—	—	—	—	1	—	—	1	—	—	—	4
	273	147	96	65	33	22	11	5	7	3	—	3	1	—	666

Age of mothers at birth of stillborn children during 1953.

(A) Place in family of each investigated stillbirth (legitimate).

Place in family												Total births
1	2	3	4	5	6	7	8	9	10	12		
4	3	—	—	—	—	—	—	—	—	—	—	7
36	13	7	2	1	—	—	—	—	—	—	—	59
24	26	17	10	2	1	1	—	—	—	—	—	81
18	15	14	12	5	4	2	—	—	—	—	1	71
4	8	6	5	6	3	5	—	1	—	—	1	39
4	5	3	3	4	2	—	1	—	—	—	—	22
—	—	—	1	—	2	—	—	—	—	1	—	4
90	70	47	33	18	12	8	1	1	1	1	2	283

(B) *Place in family of each investigated stillbirth (illegitimate).*

Age groups Years	Place in family						Total births
	1	2	3	5	6	8	
15—	3	—	—	—	—	—	3
20—	7	1	—	—	—	—	8
25—	1	1	1	—	1	—	4
30—	1	1	—	—	—	—	2
35—	—	1	1	1	2	1	6
	12	4	2	1	3	1	23

Stillbirths.

The number of stillbirths allocated to the health visitors for investigation was 306.

Found children.

The health visitors found 1,682 other children belonging to families who had moved into Manchester during the year. The year of their birth was as follows:—

- 646 born 1953.
- 398 „ 1952.
- 273 „ 1951.
- 216 „ 1950.
- 149 „ 1949.

Deaths.

431 deaths occurred amongst children under 5 years of age.

The classification according to age is:—

Children under 1 year	373
„ 1—2 years	23
„ 2—3 years	16
„ 3—4 years	11
„ 4—5 years	8

The distribution according to age of children who died under 1 year was as follows:—

Died under 1 day	Died 1 to 7 days	Died 1 week to 4 weeks	Died 1 month to 3 months	Died 3 months to 6 months	Died 6 months to 9 months	Died 9 months to 12 months	To
120	108	27	50	38	15	15	373

The following table gives mortality rates for quinquennial period 1911-15 based upon the number of live births for the year. A table is also included showing mortality rates for measles and whooping cough.

Infant and child mortality rate per 1,000 live births.

Quinquennial periods 1911-1953

Quinquennial period	Infant mortality	Child mortality, 1-2 years	Child mortality, 2-5 years
1915	133.13	45.0	35.5
1920	104.51	34.9	34.3
1925	95.85	34.2	23.9
1930	87.88	26.2	20.9
1935	77.34	18.3	17.6
1940	70.81	11.3	11.3
1945	63.85	6.3	8.1
1950	48.34	3.3	3.8
.. .. .	35.29	3.1	2.0
.. .. .	34.28	3.2	2.8
.. .. .	30.53	1.8	2.9

Infant and child mortality rate per 1,000 live births
and case mortality rates for measles and whooping cough.

Infant mortality rate	Mortality rate 1-2 years	Mortality rate 2-5 years	Mortality rate 1-5 years	Total cases of measles		Total known cases of whooping cough	
				Cases	Mortality per cent	Cases	Mortality per cent
60.88	5.9	6.8	12.7	4,419	.27	3,277	1.28
53.59	5.6	3.8	9.4	6,736	.13	2,003	1.30
55.80	3.7	6.0	9.7	5,596	.14	1,835	1.36
63.71	3.7	3.9	7.7	3,800	.08	2,265	1.41
59.76	4.1	3.4	7.5	9,008	.23	2,308	.78
42.12	3.2	3.9	7.1	10,650	.16	2,612	.73
38.24	2.7	4.5	7.2	6,485	.11	2,749	1.05
37.87	2.7	3.4	6.1	9,798	.08	4,187	.41
35.29	3.1	2.0	5.1	8,953	.01	2,255	.13
34.28	3.2	2.8	6.0	10,035	.06	2,636	.30
30.53	1.8	2.9	4.7	6,798	.03	2,112	.19

Expectant mothers.

Health visitors also visited at the end of six months all mothers who had given birth to a stillborn child or to a child who had died before reaching the age of one month, in order to ensure adequate ante-natal care should she subsequently become pregnant. 349 stillbirths and 269 neo-natal deaths occurred in the City during 1952, and 1,032 special visits were made by the health visitors during 1952-53 to those mothers. In this way, 42 expectant mothers who might require special care were brought to the notice of the Department.

Co-operation with School Health Service.

A report on every child reaching school age and known, on the health visitor's final visit, to be suffering from medical defect or to have an unsatisfactory family history, is referred to the School Health Department; 694 summaries were sent during the year, classified as follows:—

Unsatisfactory condition in child	460
History of tuberculosis in child	21
History of tuberculosis in family	193
History of rheumatism in child	7
History of rheumatism in family	10
Unsatisfactory history in family	3
Total	<hr/> 694 <hr/>

Defective children.

(1) Total number of defective children from 0—5 years on the register on 31st December, 1953	994
(2) Number of those who were born during 1953	184
(3) The number in (2) who recovered	2
The number in (2) who died	49
The number in (2) who removed out of Manchester	5
Total number still on register on 31st December, 1953	128
	<hr/> 184 <hr/>
(4) Number of children who had during the year reached the age of 2 years and were referred to the School Health Service in accordance with the Education Act, 1944, Section 34	328
(5) The number of children under five years of age notified during 1953 as suffering from poliomyelitis	4
(6) Number in (5) who recovered	1
(7) Number in (5) suffering from paralysis and still requiring treatment	3
	} 4

Welfare of women and children on canal boats.

Manchester canal carrying companies do not allow women and children on their boats, but women and children are still found on some of the "naughty boats."

Arrangements are made for an official at the Docks to inform the Health Department when these boats are in the Docks, and in addition the health officer makes an investigation each time she is in the area, and during the year 1951 visits were paid but on only three occasions were there boats in, with men and children on board, as follows:—

- Family 1. Accommodation—2 "narrow" boats. Condition, fairly clean.
 Family seen previously in 1951 by health visitor.
 Father in charge of family; looked healthy. Mother not seen—had gone to the Food Office.
 Children—Boy 10 years, boy 9 years, just recovered from measles. Girl 3 years 10 months, girl 2 years, both with measles rash.
 The general condition of the children appeared good but they had troublesome coughs and the father was advised to get a doctor to see them. Advice relating to isolation and disinfection was given.
 The boats were moving on the same evening.
- Family 2. Accommodation—2 "narrow" boats. Condition, fairly clean.
 Father.
 Mother.
 Children—Boy 17 years, girl 13 years.
 All healthy and weather-beaten.
 Boats moving on to Salford the same day.
- Family 3. Accommodation—2 "narrow" boats. Condition—clean, but cabins untidy.
 Father.
 Mother.
 Children—Boy 11 years, girl 10 years: clothing satisfactory and fairly clean; have had very little schooling. Boy 4 years 10 months: tall, slim child; clothing satisfactory and clean; not vaccinated or immunised against diphtheria.
 Mother invited to take youngest child to the Toddlers' Clinic at Hulme Child Welfare Centre.
 All the family looked healthy; friendly, care-free type.

Total families—3.

Total children on board—9.

0—1 year	..	Nil	9 years	..	1
1—2 years	..	Nil	10 "	..	2
2—3 "	..	1	11 "	..	1
3—4 "	..	1	13 "	..	1
4—5 "	..	1	17 "	..	1

Care of aged and infirm persons.

Special provision is made in the National Assistance Act, 1948, for securing necessary care and attention for persons who:—

- (a) are suffering from grave chronic disease or, being aged, infirm or physically incapacitated, are living in insanitary conditions; and
 (b) are unable to devote to themselves and are not receiving from other persons proper care and attention.

308 individual visits were paid by health visitors to 1,466 persons whose instances were reported to be unsatisfactory and were brought to the attention of the Department, including 521 brought forward from last year.

In dealing with these cases the Department continued to maintain close liaison with the Welfare Services Department, the Manchester District Nursing Association and hospital almoners.

Details follow with regard to the action taken to deal with the cases reported and the comparable figures for 1952:—

	1952	
Voluntary admissions to hospitals—		
Crumpsall	113	
Withington	127	
Springfield	3	
Newholme	2	
Manchester Royal Infirmary	7	
Ladywell	1	
Hope	2	
Ancoats	1	
Davyhulme	—	
Shaw Heath Hospital, Stockport	4	
Northern Hospital	1	
Jewish Hospital	1	
Wythenshawe	5	
Patricroft	1	
Bridgewater	1	
Jericho	—	
Royal Eye Hospital	—	
Devonshire Hospital, Buxton	—	
Christie Hospital	—	
Salford Royal	—	
Birch Hill Hospital, Rochdale	—	
Admitted to—		
Little Sisters of the Poor	1	
Private nursing homes	6	
Mayfield House	—	
Culcheth Homes	2	
Jewish Home for the Aged	1	
Red Cross Home	1	
Langho Colony	1	
Church Army Home	1	
Referred to—		
Mental Health Section	17	
Welfare Services Department	68	
Blind Aid Society	—	
Tuberculosis Section	1	
Sanitary Section	—	
Died before admission to hospital	78	
Recovered (nursed at home)	8	
Removed—no trace	3	
Removed to a relative's home	20	
Removed outside the Manchester area	2	
Compulsory removals under Section 47 of the National Assistance Act, 1948	17	
No further action necessary	41	
Carried forward at 1st January, 1954	521	
	<u>1,058</u>	1,058
Total number of visits paid during period 1st January, 1952, to 31st December, 1952	3,211	
Total number of visits paid during period 1st January, 1953, to 31st December, 1953	—	5,

Particulars of persons dealt with under Section 47 of the National Assistance Act, 1948, and (Amendment) Act, 1951, during the year 1953.

16 new persons were dealt with during the year 1953.

11 persons were still under supervision at January 1st, 1953.

Total persons under supervision and dealt with during 1953, 27.

Brought forward from 1950	2	
" " " 1951	4	
" " " 1952	5	
Total number brought forward		11
New cases dealt with during 1953		16

1950 cases brought forward	2	
Settled in accommodation during 1953 and extension of Court Order not required ..	1	
Died	1	0
1951 cases brought forward	4	
Settled in accommodation during 1953 and extension of Court Order not required ..	4	0
1952 cases brought forward	5	
Settled in accommodation during 1953 and extension of Court Order not required ..	2	
Recovered—discharged home	1	
Court Order renewed	2	2
1953 new cases	16	
Settled in accommodation during 1953 and extension of Court Order not required ..	7	
Died	5	
Court Order still in force or being renewed ..	4	4

Summary of all cases under supervision and those dealt with for the first time during 1953.

12 of these were admitted to Part III accommodation.

4 of these were admitted to chronic sick wards.

Settled in accommodation during 1953 and extension of Court Order not required	14
Died during the year	6
Recovered—discharged home	1
Court Order still in force or renewed ..	6

Carried forward to 1954 from 1952	2	
" " 1954 " 1953	4	
Total number carried forward		6

Section 47—National Assistance Act, 1948, and (Amendment) Act, 1951—Cases during 1953.

Sex	Age	Reason for Council's action	Period named in the order of the Court	Type of accommodation to which the person was removed	Result of Council's action	Other information of interest	Ultimate result
F.	90	Aged and infirm person. Suffering from a grave chronic disease.	3 weeks	Crumpsall Hospital.	Court Order taken out 7th January, 1953.	Extreme senility. Oedema of legs. Skin broken.	Died 10th January, 1953.
F.	78	Patient aged and infirm. Unable to devote to herself proper care and attention.	3 months	Part III Newholme.	Court Order taken out 21st January, 1953.	Extreme senility.	April, 1953. Settled. Not necessary to renew Court Order.
F.	84	Aged and infirm person. Living in insanitary conditions.	3 months	Part III Newholme	Court Order taken out 18th February, 1953.	Blind. Elderly relative had attempted to care for patient, but it was too much for her.	20th May, 1953. Settled. Not necessary to renew Court Order.
F.	64	Living in insanitary conditions. Alone. In need of care and attention.	3 weeks	Part III Springfield.	Court Order taken out 24th February, 1953	Has relatives but they have not spoken to her for twenty years.	Court Order renewed 16th December, 1953.
M.	70	Patient living in insanitary conditions. In need of care and attention. Refuses to go into hospital.	3 weeks	Chronic sick bed. Withington Hospital.	Court order taken out 24th February, 1953.	Suffering from bronchitis, also was very undernourished.	Died 20th March, 1953.
F.	70	Living in insanitary conditions. Unable to care for herself.	3 months	Part III Newholme.	Court Order taken out 22nd April, 1953.	Son, 30 years, living at same address, would not take care of his mother.	8th July, 1953. Settled in Newholme. Not necessary to renew Court Order.
F.	82	Living in insanitary conditions. Unable to devote to herself proper care and attention.	3 months	Part III Springfield	Court Order taken out 13th May, 1953.	Using paraffin lamps. Left unattended. Room filled with old boxes and newspaper. No known relatives.	Settled in Springfield. No need to renew Court Order.
F.	75	Seriously ill. Living in insanitary conditions and not receiving proper care and attention.	3 weeks	Chronic sick bed. Crumpsall Hospital.	Court Order taken out 20th May, 1953.	Patient had gangrenous bedsores.	Died 9th June, 1953.
M.	68	Living in insanitary conditions. Unable to devote to himself proper care and attention.	3 months	Part III Newholme	Court Order taken out 17th June, 1953.	Undernourished and mentally confused. Very eccentric. Refused to allow anyone in the house.	Settled in Newholme. 24th August, 1953.

Sex	Age	Reason for Council's action	Period named in the order of the Court	Type of accommodation to which the person was removed	Result of Council's action	Other information of interest	Ultimate result
F.	72	Very neglected. Unable to devote to herself proper care and attention.	3 months	Chronic sick bed, Crumpsall Hospital	Court Order taken out 17th June, 1953.	Had chronic Arthritis. Living in furnished rooms. Separated from husband.	Settled in Newholme. 24th August, 1953.
F.	72	Aged and infirm. Living in insanitary conditions. Unable to devote to herself proper care and attention.	3 months	Part III Springfield	Court Order taken out. 22nd July, 1953.	Only near relative is a daughter who is an invalid and who requires constant attention herself.	Settled in Springfield. 13th October, 1953.
F.	85	Aged and infirm. Not able to care for herself and no one available to care for her.	3 weeks	Part III Newholme. (Later transferred to Withington Hospital).	Court Order taken out 3rd October, 1953.	Only relative—a niece in the south of England.	Died in Withington Hospital.
F.	88	Aged and infirm. Not able to care for herself, and no one available to care for her.	3 months	Part III Newholme	Court Order taken out 28th October, 1953.	Patient became very senile and could not be kept clean and properly cared for in spite of every effort by relatives to do this.	Court Order still being renewed.
F.	74	Aged and infirm. Living in insanitary conditions and unable to care for herself.	3 weeks	Part III Newholme	Court Order taken out 17th November, 1953.	Patient became very senile and unable to care for herself. House dirty and neglected. Patient began wandering in the streets at all hours and wearing insufficient clothing. No known relatives.	Court Order still being renewed. Date of last renewal 9th December, 1953
F.	67	Aged and infirm. Dirty and verminous. Confused in manner. Physically under-nourished.	3 months	Part III Newholme	Court Order taken out 10th November, 1953.	Dirty in person, continually buying old clothes from rag and bone merchants, which infest the house with vermin. Family unable to manage patient. Married son living at the same address suffering from "Epilepsy," Family comprised—husband, son, daughter-in-law.	Court Order to be renewed in February, 1954, if required.
M.	71	Dirty and neglected in person. Home very dirty. Unable to care for himself; lived alone.	3 months	Part III Newholme	Court Order taken out 16th December, 1953	Stone deaf. Not getting adequate diet.	Court Order to be renewed in March, 1954, if required.

Verminous conditions and scabies.

Persons treated for verminous conditions at Monsall Clinic.

Year	Males adult	Females adult	School children	Children under 5	Total persons
1949	229	99	242	24	594
1950	319	133	202	13	667
1951	507	116	276	22	921
1952	460	112	260	25	857
1953	382	106	181	26	695

The Department has a scheme for supplying special steel combs at a price to mothers and 21 steel combs were so distributed during 1953.

Scabies.

The main source of notification of scabies is the School Health Service many cases are brought to the notice of health visitors, either as contacts or those notified by the School Health Service or as new cases.

The source and number of notifications received during 1953 and preceding years were as follows:—

Sources of notification of scabies.

	1949	1950	1951	1952
School Health Service	276	140	162	156
Hospitals	24	6	8	21
General practitioners	158	130	107	100
Centre medical officers	30	4	4	9
Health visitors	70	10	3	18
Children's Department	—	—	1	—
Applied voluntarily	78	99	50	93
Discovered at Monsall Clinic	3	17	16	33
H.M. Forces	—	—	—	—
Salvation Army	—	6	1	—
Welfare Services Department	—	8	1	—
Sanitary Section	—	—	2	—
Ministry of Health	3	—	—	1
Business houses	2	—	1	1
Day nurseries	—	6	—	—
N.S.P.C.C.	—	—	—	3
Total	644	426	356	435

The number of persons treated at Monsall Clinic is shown in the following table:—

Treatment for scabies.

Year	Males adult	Females adult	School children	Children under 5	Total persons
1949	162	186	82	75	505
1950	93	143	76	79	391
1951	61	88	66	63	278
1952	143	166	117	144	570
1953	161	164	131	95	551

scabies is treated by two applications of an emulsion of benzyl benzoate at an interval of from one to four days between the first and second treatments.

The health visitor paid 217 visits to homes in which scabies occurred in

The Clinic received 159 visitors during the year for purposes of receiving advice and information. The visitors included district nurses, student nurses, student nursery nurses and nursing cadets.

National Society for the Prevention of Cruelty to Children.

The Department is again indebted to this Society for assistance in dealing with certain difficult cases. During the year help has been obtained by many members of the staff from decentralised Centres by personal contact, as well as from the central office.

Training of student health visitors.

An eight-months full-time course, approved by the Ministry of Health, is being run by the Manchester Municipal College of Technology in co-operation with the Health Department.

55 students were entered for the examination of the Royal Sanitary Institute in May, 1953. Of these, 30 were successful at the first attempt, and, with one exception, the remaining students subsequently passed the examination.

19 students enrolled for the course which began in September, 1953, 13 of whom were sponsored by the City Council. Other students were sponsored by various neighbouring local health authorities.

The students also gain practical experience in other departments of the health authority such as the School Health, Welfare Services and Children's Health Departments. Observation visits are arranged to supplement the knowledge gained in lectures. The students are given an insight into the work of a rural health visitor and spend some time in another county borough area outside Manchester.

An exhibition of the students' work was incorporated in the Annual Exhibition Course for public health nurses and health visitors. The exhibition included group theses and projects on a variety of subjects, including home visits, health and industry, juvenile delinquency and rheumatism. In addition to the exhibits, handbags and toys made at a minimum cost were on show.

A health visitor tutor student from the Royal College of Nursing spent several weeks gaining experience in the training course. Other visitors from other health authorities in the country and overseas have been shown the work of the training centre.

Visits by health visitors, 1953.

Type or cause of visit	No
Primary visits	1
Subsequent visits	3
Children 1—2 years	2
Children 2—3 years	2
Children 3—4 years	2
Children 4—5 years	2
Children 5—14 years .. .. .	..
Special visits (not otherwise accounted for) .. .. .	..
Visits "out" .. .. .	..
Persons over 14 years .. .. .	..
Visits by centre superintendents—	
Ante-natal .. .. .	..
Post-natal .. .. .	..
Infants .. .. .	..
V.D. primary .. .. .	..
V.D. subsequent .. .. .	..
Total	16
Classified visits included in the above total—	
Children—removals .. .. .	..
Children—not seen .. .. .	..
Ante-natal care—	
Stillbirths, primary .. .. .	..
Stillbirths, subsequent, Ex. .. .. .	..
Stillbirths, subsequent, N.P. .. .. .	..
Neonatal deaths, Ex. .. .. .	..
Neonatal deaths, N.P. .. .. .	..
Expectant mothers, primary visits .. .. .	..
Expectant mothers, subsequent visits .. .. .	..
Overcrowding and sanitary defects—	
Overcrowding .. .. .	..
Defects reported .. .. .	..
Special visits .. .. .	..
Scabies—	
Primary visits .. .. .	..
Subsequent visits .. .. .	..
Verminous conditions—	
Primary visits .. .. .	..
Subsequent visits .. .. .	..
Measles—	
Primary visits .. .. .	..
Subsequent visits .. .. .	..
German measles, primary visits .. .. .	..
German measles, subsequent visits .. .. .	..
Whooping cough—	
Primary visits .. .. .	..
Subsequent visits .. .. .	..
Pneumonia—	
Primary visits .. .. .	..
Subsequent visits .. .. .	..
Miscellaneous—	
Investigations <i>vs</i> infantile diarrhoea .. .. .	..
Aged and infirm cases .. .. .	..
Wrong addresses—	
Infants .. .. .	..
Infectious diseases .. .. .	..
Investigation of V.D. primary .. .. .	..
Investigation of V.D. subsequent .. .. .	..
Total	2
Visits by student health visitors, included in total visits .. .. .	..
Number of child welfare centre sessions attended by health visitors .. .. .	..

NURSING HOMES REGISTRATION.

(Public Health Act, 1936, Sections 187—194)

1 nursing home was registered during the year; none was discontinued.

There was a total of 14 registered nursing homes at the end of the year, of which four were registered for maternity patients, two for maternity, medical surgery patients and eight for medical and surgical patients.

Exemptions under Section 192 of the Public Health Act, 1936, were granted to three voluntary hospitals.

A medical officer made regular visits to all registered nursing homes during the year.

DAY NURSERIES

Accommodation is afforded for 1,406 children in the Health Committee's day nurseries. The day nursery at Prospect House was discontinued on 1 April, 1953, due to the termination of a lease, and all the children using that nursery were found places in other day nurseries in the area.

The number of children on the day nursery registers was increased by a further 5 per cent. during the year, to a total of 15 per cent. above the number of places provided, in order to ensure that the best practical use is made of the accommodation. At the end of December, 1953, there were 1,641 children on the registers and an average attendance of 1,356. There were 1,617 new admissions and 1,572 discharges during 1953 and 304 children were admitted to short term accommodation for the period of their mothers' stay in hospital. 13 children were on the waiting list for admission.

There was no change in the charges for accommodation, i.e. 3s. 0d. per week where both parents are gainfully employed and 2s. 3d. per day where only one parent is gainfully employed.

The system of priorities for admission also remained unchanged.

Each child has a medical examination before admission and further routine examinations at intervals. The Department's medical officers made 6,548 such examinations during the year.

Diphtheria and whooping cough immunizations were also afforded to children in the day nurseries.

The incidence of infectious disease in children at day nurseries was materially less than in the previous year. There was an extensive outbreak of Sonne's enterity at one day nursery and precautions against this form of infection have been intensified.

Every effort is made to avoid accidents to children in day nurseries, but despite the care by the staff a number of minor accidents occurred, which all received immediate attention.

2 burglaries occurred during the year, which resulted in a considerable loss of rationed goods, as well as malicious damage.

Day nurseries have been approved by the Ministry of Health for the training of students for the certificate of the National Nursery Examination Board, and under reciprocal arrangements with the Education Committee, students are afforded full training in the care of children 0—5 years. All Health Committee students were successful in the 1953 examination.

Suitable members of the staff took the Warden's Course and others to the Child Care Reserve Course.

Arrangements were made for medical students and social science and administration students to attend at day nurseries in order to gain experience.

The structural maintenance of buildings used as day nurseries continues to present many problems, particularly regarding prefabricated buildings, the least being the heavy expense involved. During 1953 a number of improvements were effected to sanitary accommodation and other toilet facilities in the day nurseries.

The use of private commercial laundries for nursery work was discontinued during the year and all laundering is carried out in the Baths and Wash-house Committee's Central Laundry.

TUBERCULOSIS SERVICE.

(Care and after-care)

The administrative offices for this section of the Health Department are located at 352, Oxford Road, Manchester, 13. There is a very close co-operation between the Health Committee's scheme and the Regional Hospital Board, the local authority paying an agreed proportion of the Chest Physicians' salaries for their work in the preventive aspects of the disease. The two departments share the same premises, the Regional Hospital Board paying an agreed rate to the Health Committee.

Under Section 28 of the National Health Service Act the local authority provides for:—

- The visiting and supervision of tuberculous patients and their families by 12 tuberculosis health visitors and 2 tuberculosis inspectors.
- The loan of beds and bedding, free of charge, to assist treatment and secure the isolation of the patient.
- The provision of food grants and clothing to patients and their families whose incomes are below a set scale.
- The loan of nursing requisites, free of charge, to patients on domiciliary care.
- The free distribution of sputum boxes and flasks.
- The disinfection of premises, bedding and clothing.
- The loan of garden shelters.
- The colonization of patients in village settlements.
- Assistance in rehousing.
- Financial advice in regard to entitlement to National Assistance, etc.
- Co-operation with the Ministry of Labour in regard to the placing of selected patients in suitable employment.

The City Council's scheme for the Tuberculosis Service includes, where economic circumstances permit, the establishment of a night sanatorium for patients who are capable of work during the day, but require accommodation where they can be kept under observation during the night. A workshop for ex-patients is also envisaged, and the Ministry of Labour may assist in this regard by the establishment of a "Remploy" factory in the City area.

Notification.

Respiratory tuberculosis.

In the year 1953 there was a slight increase in the number of new cases of respiratory tuberculosis notified, the figure being 742 as compared with 717 in 1952. 436 cases were notified amongst males, a reduction of 2 from the 1952 figure. Females numbered 306, an increase of 27 over the total for 1952. The increases occurred in the age groups 15—19 (16) and 20—24 (13).

Non-respiratory tuberculosis.

The number of notified cases has decreased from 96 in 1952 to 93 during 1953, males numbering 40 and females 53.

Mortality.

The deaths from respiratory tuberculosis numbered 198, this being a reduction of 71 from the figures in 1952.

The non-respiratory deaths totalled 18 as compared with 24 in 1952.

The following gives a brief summary of the work of the section:—

Respiratory tuberculosis health visitors:—

Primary investigations	943
Routine domiciliary visits	19,718
Post-death visits	319
Special visits	1,599

Home nursing:—

Number of patients	54
Number of visits	2,145

Assistance to patients and families during 1953:—

Food grants	75
Loan of beds and bedding	115
Loan of nursing requisites	89

<i>Disinfectant boxes issued</i>	42,290
--	--------

<i>Disinfectant flasks issued</i>	72
---	----

Disinfections by Corporation:—

Premises	607
Bedding	66

Rehousing applications:—

Cases reviewed	520
Cases recommended	266
Families re-housed during the year	207

B.C.G. vaccination.

B.C.G. vaccination was commenced in the Spring of 1951 and the following table shows how the work has proceeded:—

Year	Number of B.C.G. sessions	Number of Mantoux and Jelly Patch Tests	B.C.G. vaccinations
1951	64	2,044	507
1952	99	3,093	881
1953	93	3,382	872

A limiting factor in the work is the lack of segregation facilities for children contacts who cannot be isolated from an infectious case for the required period of three months, and we have over 200 Mantoux negative children precluded from B.C.G. vaccination for this reason.

The statistics for the year are shown in the following tables:—

Primary notifications of and deaths from tuberculosis.

Comparative figures 1933—1953.

(Rates per thousand of the population.)

Year	Primary notifications						General death rate, M/er.	Death rate all respiratory diseases except tuberculosis (M/er.)	Death rates, Tuberculosis Manchester					
	Respiratory			Non-respiratory					Respiratory			Non-respiratory		
	M. Rate	F. Rate	Persons Rate	M. Rate	F. Rate	Persons Rate			M. Rate	F. Rate	Persons Rate	M. Rate	F. Rate	Persons Rate
1933	1.75	1.06	1.39	0.42	0.38	0.40	13.65	1.97	1.29	0.82	1.04	0.13	0.13	0.13
1934	1.69	1.06	1.36	0.47	0.34	0.40	12.63	1.47	1.39	0.67	1.01	0.17	0.15	0.16
1935	1.59	1.00	1.28	0.40	0.38	0.39	13.53	1.73	1.21	0.72	0.95	0.13	0.12	0.13
1936	1.47	1.07	1.26	0.43	0.35	0.39	13.72	1.83	1.13	0.70	0.90	0.15	0.13	0.14
1937	1.73	1.03	1.36	0.52	0.46	0.49	13.87	1.70	1.14	0.72	0.92	0.18	0.14	0.16
1938	1.52	0.98	1.24	0.41	0.36	0.38	12.61	1.32	1.07	0.66	0.86	0.14	0.13	0.14
1939	1.49	0.96	1.21	0.40	0.36	0.35	13.39	1.30	1.10	0.64	0.86	0.16	0.13	0.14
1940	1.95	1.13	1.51	0.41	0.36	0.38	17.98	4.00	1.43	0.78	1.09	0.16	0.13	0.15
1941	2.12	1.16	1.61	0.45	0.41	0.43	16.64	2.81	1.45	0.84	1.13	0.19	0.19	0.19
1942	1.78	1.22	1.48	0.37	0.41	0.39	14.72	2.13	1.23	0.76	0.99	0.14	0.12	0.13
1943	1.78	1.25	1.50	0.41	0.49	0.45	15.50	2.64	1.14	0.71	0.91	0.16	0.15	0.16
1944	1.62	1.14	1.37	0.33	0.36	0.34	14.20	2.04	0.95	0.66	0.80	0.13	0.10	0.11
1945	1.73	1.23	1.46	0.34	0.31	0.32	14.41	2.33	1.00	0.62	0.80	0.16	0.10	0.13
1946	1.56	0.89	1.20	0.28	0.22	0.25	13.52	2.09	0.92	0.48	0.69	0.08	0.12	0.10
1947	1.41	0.91	1.15	0.21	0.18	0.19	13.79	2.11	0.88	0.46	0.66	0.11	0.08	0.09
1948	1.50	1.01	1.24	0.19	0.21	0.20	12.27	1.80	0.89	0.50	0.69	0.06	0.08	0.07
1949	1.58	1.02	1.28	0.20	0.24	0.22	12.91	2.10	0.76	0.45	0.60	0.06	0.04	0.05
1950	1.28	0.84	1.05	0.21	0.17	0.19	12.77	1.86	0.77	0.42	0.58	0.07	0.06	0.07
1951	1.23	0.82	1.02	0.13	0.17	0.15	13.82	2.50	0.61	0.32	0.45	0.05	0.06	0.06
1952	1.32	0.75	1.02	0.13	0.14	0.14	12.16	1.70	0.59	0.20	0.38	0.04	0.03	0.03
1953	1.32	0.83	1.06	0.12	0.14	0.13	12.31	1.86	0.39	0.19	0.28	0.04	0.02	0.03

Tuberculosis (pulmonary and non-pulmonary).
Incidence and deaths in age groups for the years 1930 to 1953.

Year	0 —				1 —				5 —				15 —				45 —				65 —				Total			
	Pul.		Non-pul.		Pul.		Non-pul.		Pul.		Non-pul.		Pul.		Non-pul.		Pul.		Non-pul.		Pul.		Non-pul.		Cases		Deaths	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
1930	2	5	17	10	87	47	27	58	324	297	36	16	36	33	4	5	1,263	898	446	163	1,709	1,061						
1	1	4	10	10	83	42	19	45	762	276	28	13	28	25	7	4	1,229	861	481	133	1,710	994						
2	1	2	6	7	69	35	28	33	243	254	26	11	26	23	3	5	1,061	766	388	199	1,449	885						
3	4	4	7	8	110	44	15	45	701	498	20	10	21	26	1	3	1,053	791	304	100	1,357	891						
4	—	8	7	9	105	27	105	50	258	252	17	9	17	40	2	2	1,026	761	303	120	1,329	881						
5	3	4	4	6	45	17	98	42	611	430	22	16	22	20	6	1	957	714	294	94	1,251	808						
6	1	1	4	6	50	21	25	36	615	396	109	36	22	32	3	2	937	671	289	105	1,226	776						
7	1	2	9	6	53	22	87	44	577	350	124	29	22	45	9	7	1,001	674	358	115	1,359	789						
8	3	3	3	3	38	15	54	35	620	408	112	14	18	32	6	6	907	627	282	99	1,189	726						
9	3	3	3	3	28	21	31	41	620	408	112	14	23	40	5	5	849	601	265	100	1,114	701						
1940	3	4	2	3	46	35	18	39	610	366	124	11	23	43	6	4	943	678	239	91	1,182	769						
1	—	1	2	2	31	15	12	42	610	366	124	11	13	39	4	4	968	679	258	115	1,226	794						
2	—	2	4	3	29	20	12	34	615	338	119	34	24	30	4	5	894	592	234	80	1,128	672						
3	1	2	4	3	48	29	14	41	614	291	138	41	26	34	7	2	900	546	272	93	1,172	639						
4	2	3	3	3	32	13	41	21	522	275	114	21	20	44	3	3	840	491	211	68	1,051	559						
5	3	3	6	5	57	14	10	28	606	257	91	28	15	37	3	3	913	496	200	81	1,113	577						
6	3	3	5	4	57	14	14	22	517	232	71	22	13	32	5	1	805	460	168	67	973	527						
7	3	4	2	3	38	9	9	25	482	236	59	14	13	27	6	4	786	450	134	64	920	514						
8	4	5	3	3	42	8	25	14	545	261	66	14	18	41	8	4	863	477	141	49	1,004	526						
9	4	7	3	3	36	4	20	23	566	220	81	6	12	41	2	4	899	418	154	38	1,053	456						
1950	7	3	—	3	36	4	36	6	449	159	10	8	10	36	4	5	737	411	132	47	869	458						
1951	6	3	1	2	22	7	24	56	449	134	11	7	11	19	3	2	711	318	105	39	816	357						
1952	11	4	—	2	48	7	6	15	416	151	130	6	6	30	4	3	717	269	96	24	813	293						
1953	7	4	2	1	27	5	5	46	460	67	38	8	14	36	4	1	742	198	93	18	835	216						
					28	2	—	38					14	36														

Tuberculosis (non-respiratory)—new cases notified during 1953—Age groups and site.

Age Groups	LOCATION OF DISEASE.																Totals			
	Meninges		Miliary		Abdomen		Bones joints		Vertebral column		Lymphatic system		Genito-urinary		Other sites		M.	F.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
0-4	—	—	—	—	—	—	2	2	1	—	—	—	—	—	—	—	1	—	4	5
5-9	—	3	—	—	—	—	1	2	1	—	3	5	—	—	—	—	—	—	5	10
10-14	—	1	—	—	1	1	2	1	2	—	3	1	—	—	—	—	—	—	8	5
15-19	—	—	—	—	—	3	—	1	1	1	1	2	1	1	1	—	1	—	4	8
20-24	—	—	—	—	—	—	—	—	1	1	—	1	—	2	—	—	—	—	3	2
25-34	—	—	—	—	—	2	—	1	1	2	2	1	3	3	—	—	2	—	8	9
35-44	—	—	—	—	—	1	—	—	—	—	1	—	1	—	—	—	—	—	2	2
45-54	—	—	—	—	—	—	3	—	—	3	—	—	—	1	—	—	—	—	3	5
55-64	—	—	—	—	—	—	1	—	—	2	—	1	—	—	—	—	—	—	1	5
65-	—	—	—	—	—	—	1	—	—	2	1	—	—	—	—	—	—	—	2	2
Totals ..	—	4	—	—	1	7	10	7	7	11	14	14	7	7	4	3	40	53		

Sources of notification of tuberculosis during 1953.

Source	Respiratory	Non-respiratory	Totals
General practitioners	361	6	367
Clinic staff	112	3	115
General hospitals	227	68	295
Special hospitals	5	—	5
Sanatoria	8	16	24
Forces	28	—	28
Other sources	1	—	1
Totals	742	93	835

Tuberculosis.

Primary notifications and deaths—1953.

Classification in municipal wards.

Ward	Estimated population	Persons per acre	NOTIFICATIONS					DEATHS (all forms)		
			Respiratory		Non-respiratory		Total all forms	Rate per 1,000 pop.	No. (Manchester figures)	Rate per 1,000 pop.
			M.	F.	M.	F.				
Park	21,758	27.89	8	7	2	—	17	0.78	6	0.28
.. .. .	18,848	59.83	21	23	2	2	48	2.55	9	0.48
.. .. .	17,899	41.05	19	7	—	1	27	1.51	5	0.28
.. .. .	15,236	13.60	11	6	—	—	17	1.12	6	0.39
.. .. .	19,480	80.16	14	10	—	4	28	1.44	6	0.31
.. .. .	20,594	16.80	14	9	1	1	25	1.21	5	0.24
.. .. .	22,945	29.72	18	9	1	4	32	1.39	7	0.31
.. .. .	22,177	30.09	12	8	—	1	21	0.95	4	0.18
.. .. .	14,284	32.03	1	5	2	1	9	0.63	5	0.35
.. .. .	20,030	23.59	9	5	1	1	16	0.80	3	0.15
.. .. .	13,879	27.70	10	7	1	—	18	1.30	3	0.22
.. .. .	22,024	12.20	16	6	1	3	26	1.18	2	0.09
.. .. .	17,292	14.64	7	5	—	1	13	0.75	1	0.06
.. .. .	22,994	42.58	9	6	2	3	20	0.87	3	0.13
.. .. .	17,493	27.72	9	9	1	1	20	1.14	5	0.29
.. .. .	18,744	50.39	9	5	1	1	16	0.85	11	0.59
.. .. .	19,492	32.17	9	6	—	—	15	0.77	4	0.21
.. .. .	20,304	52.06	11	6	—	1	18	0.89	9	0.44
.. .. .	15,755	44.38	11	10	—	1	22	1.40	8	0.51
.. .. .	14,813	33.36	8	4	—	2	14	0.95	5	0.34
.. .. .	19,390	70.00	14	6	—	—	20	1.03	8	0.41
.. .. .	18,532	69.15	14	11	2	1	28	1.51	3	0.16
.. .. .	20,464	17.49	12	8	2	—	22	1.07	5	0.24
.. .. .	14,444	40.80	17	17	1	2	37	2.56	12	0.83
.. .. .	19,106	21.11	7	6	2	—	15	0.78	6	0.31
.. .. .	19,572	39.30	14	16	3	5	38	1.94	8	0.41
.. .. .	23,507	10.54	14	11	1	1	27	1.15	6	0.26
.. .. .	17,077	27.37	7	5	—	1	13	0.76	7	0.41
.. .. .	22,824	42.03	12	8	3	1	24	1.05	3	0.13
.. .. .	17,207	23.70	6	3	1	3	13	0.76	—	—
.. .. .	19,335	60.80	19	13	1	1	34	1.76	5	0.26
.. .. .	18,258	63.62	15	14	1	1	31	1.70	7	0.38
.. .. .	21,439	41.47	20	9	—	5	34	1.59	9	0.42
.. .. .	11,728	14.01	5	2	1	—	8	0.68	7	0.60
.. .. .	15,295	27.31	7	1	1	—	9	0.59	6	0.39
.. .. .	47,581	14.03	24	23	6	4	57	1.20	17	0.36
.. .. .	—	—	3	—	—	—	3	—	—	—
MANCHESTER ..	701,800	25.75	436	306	40	53	835	1.19	216	0.31

	Respiratory			Non-respiratory			Total		Grand total	
	M.	F.	C.	M.	F.	C.	M.	F.		C.
	New patients examined in the year (excluding "transfers in" and "contacts")	2848		2600	637	6085
Number of contacts examined in the year (excluding "transfers in")	..	..	..	..	..	..	610	807	891	2308
Totals	..	..	..	..	..	..	3458	3407	1528	8393
Number diagnosed as tuberculous in year (excluding "contacts")	411	266	99	..	2	5	411	268	104	783
Number of contacts diagnosed as tuberculous during the year	7	22	14	..	..	..	7	22	14	43
Totals	418	288	113	..	2	5	418	290	118	826
Number removed from the register as "Recovered" during the year	126	106	31	24	19	15	150	125	46	321
Number of cases on the register at 1st January, 1953	2225	1800	420	140	169	105	2365	1969	525	4859
Number of cases on the register at 31st December, 1953	2259	1803	436	68	76	45	2327	1879	481	4687
Number of patients on the register awaiting admission to a tuberculosis institution at 31st December, 1953	43	39	4	..	2	1	43	41	5	89
Total attendances at the clinic	..	..	..	..	..	..	..	..	..	39,113
Number of clinical sessions	..	..	..	..	..	..	..	..	..	1,272

CASES ON NOTIFICATION REGISTER.

(At January, 1954).

City · Ward	Respiratory		Total	Non-respiratory		Total
	Active	In-active		Active	In-active	
Alexandra Park	85	30	115	6	6	12
All Saints'	103	32	135	13	8	21
Ardwick	79	19	98	8	11	19
Barlow Moor	53	36	89	3	3	6
Beswick	77	19	96	10	7	17
Blackley	114	33	147	8	5	13
Bradford	91	42	133	9	7	16
Burnage	80	39	119	7	6	13
Cheetham	56	21	77	5	6	11
Chorlton-cum-Hardy	58	29	87	5	1	6
Collegiate Church	86	21	107	5	2	7
Crumpsall	94	25	119	5	6	11
Didsbury	45	16	61	1	2	3
Gorton North	84	23	107	9	5	14
Gorton South	66	28	94	7	7	14
Harpurhey	70	14	84	5	8	13
Levenshulme	57	23	80	6	9	15
Lightbowne	60	16	76	9	6	15
Longsight	60	22	82	4	9	13
Miles Platting.. .. .	54	10	64	6	6	12
Moss Side East	84	41	125	8	5	13
Moss Side West	99	30	129	15	12	27
Moston	84	35	119	5	6	11
New Cross	72	14	86	4	5	9
Newton Heath	70	23	93	6	12	18
Newtown.. .. .	80	26	106	12	12	24
Northenden	260	83	343	10	19	29
Old Moat	90	38	128	8	8	16
Openshaw	96	33	129	5	9	14
Rusholme	53	26	79	7	5	12
St. George's	80	29	109	9	12	21
St. Luke's	86	24	110	7	11	18
St. Mark's	101	32	133	9	11	20
St. Peter's	38	11	49	4	4	8
Withington	41	18	59	3	1	4
Wythenshawe	536	223	759	34	42	76
Totals—January, 1954 ..	3,342	1,184	4,526	277	294	571
January, 1953 ..	3,253	1,134	4,387	431	213	644
January, 1952 ..	2,983	1,338	4,321	505	412	917
March, 1951 ..	2,848	1,684	4,532	570	576	1,146
March, 1950 ..	2,798	1,568	4,366	571	571	1,142

**Summary of notifications of tuberculosis during the period
1st January to 31st December, 1953, in the City.**

Age periods	FORMAL NOTIFICATIONS													Totals (all ages)
	Number of primary notifications of new cases of tuberculosis													
	0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	
Respiratory, males	4	5	14	18	19	55	55	72	53	65	49	26	1	436
Respiratory, females	3	3	11	12	14	63	68	70	24	15	14	6	3	306
Non-respiratory, males	—	—	4	5	8	4	3	8	2	3	1	1	1	40
Non-respiratory, females	2	—	3	10	5	8	2	9	2	5	5	1	1	53

**New cases of tuberculosis coming to the knowledge of the Medical
Officer of Health during the above-mentioned period, otherwise
than by formal notification.**

Source of formation		NUMBER OF CASES IN AGE GROUPS													Totals	
		0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-		
Returns from registrars	Respiratory	{ M.	—	—	—	—	—	—	—	—	—	4	6	5	1	16 (A)
		{ F.	—	—	—	—	—	—	2	1	2	2	—	1	8 (B)	
	Non-respiratory	{ M.	—	—	—	—	—	—	1	—	1	—	—	—	2 (C)	
		{ F.	—	—	—	—	—	1	1	—	1	—	1	—	4 (D)	
Returns from Registrar-General (excludable deaths)	Respiratory	{ M.	—	—	—	—	—	—	—	—	2	—	—	—	2 (A)	
		{ F.	—	—	—	—	—	—	—	—	—	—	—	—	— (B)	
	Non-respiratory	{ M.	—	—	—	—	—	—	—	—	1	—	—	—	1 (C)	
		{ F.	—	—	—	—	—	—	—	—	—	—	—	—	— (D)	
Spontaneous notifications	Respiratory	{ M.	—	—	—	—	—	—	—	—	6	4	—	—	10 (A)	
		{ F.	—	—	—	—	—	—	1	—	—	1	—	1	3 (B)	
	Non-respiratory	{ M.	—	—	—	—	—	—	—	1	1	—	—	—	2 (C)	
		{ F.	—	—	—	—	—	—	—	—	—	—	—	—	— (D)	
"Referrals" from Registrar-General (excludable deaths)	Respiratory	{ M.	—	—	1	1	—	—	6	16	10	3	8	—	45 (A)	
		{ F.	—	—	—	2	—	2	6	10	1	1	—	1	32 (B)	
	Non-respiratory	{ M.	—	—	—	—	—	—	1	1	—	—	—	—	2 (C)	
		{ F.	—	—	—	1	—	1	—	1	—	—	—	—	3 (D)	
Other sources	Respiratory	{ M.	—	—	—	1	—	—	—	2	—	—	—	—	3 (A)	
		{ F.	—	—	—	—	—	—	1	—	—	—	—	—	1 (B)	
	Non-respiratory	{ M.	—	—	—	—	—	—	—	1	—	—	—	—	1 (C)	
		{ F.	—	—	1	—	—	—	1	1	—	—	—	—	3 (D)	

Totals of cases (A) Respiratory, male	76
(B) Respiratory, female	44
(C) Non-respiratory, male	8
(D) Non-respiratory, female	10

Primary notifications—respiratory tuberculosis.
Age, incidence and classification of cases seen by Chest Physicians.
(Ministry of Health Circular 83/47 (1).)

Males.

Age group	Respiratory A				Respiratory B				Total cases classified	Cases not classified for various reasons (2)	Total notified
	1	2	3	Total	1	2	3	Total			
Under 1 yr.	3	1	—	4	—	—	—	—	4	—	
1—2 yrs.	1	2	1	4	—	—	—	—	4	1	
2—4 yrs.	9	1	—	10	1	—	1	2	12	2	
5—9 yrs.	13	—	1	14	—	1	—	1	15	3	
10—14 yrs.	15	1	1	17	—	—	—	—	17	2	
15—19 yrs.	5	20	2	27	2	15	3	20	47	8	
20—24 yrs.	5	20	—	25	2	18	3	23	48	7	
25—34 yrs.	5	13	3	21	1	38	8	47	68	4	
35—44 yrs.	—	4	—	4	1	37	9	47	51	2	
45—54 yrs.	—	8	—	8	1	34	14	49	57	8	
55—64 yrs.	1	3	—	4	—	23	9	32	36	13	
65— yrs.	—	—	3	3	—	8	5	13	16	11	
Totals ..	57	73	11	141	8	174	52	234	375	61	4
% 1953	15.2	19.5	2.9	37.6	2.1	46.4	13.9	62.4	100		
% 1952	14.6	13.3	2.5	30.5	5.0	46.3	18.1	69.5	100		

Females.

Under 1 yr.	—	1	—	1	—	—	—	—	1	2	
1—2 yrs.	2	—	1	3	—	—	—	—	3	—	
2—4 yrs.	6	2	1	9	—	—	—	—	9	2	
5—9 yrs.	7	2	1	10	1	—	—	1	11	1	
10—14 yrs.	6	4	1	11	—	2	—	2	13	1	
15—19 yrs.	8	25	1	34	2	13	4	19	53	10	
20—24 yrs.	6	22	1	29	—	31	3	34	63	5	
25—34 yrs.	5	12	2	19	2	36	7	45	64	6	
35—44 yrs.	2	3	1	6	—	13	2	15	21	3	
45—54 yrs.	—	1	—	1	—	8	3	11	12	3	
55—64 yrs.	—	—	—	—	—	8	3	11	11	3	
65— yrs.	—	—	—	—	—	3	3	6	6	3	
Totals ..	42	72	9	123	5	114	25	144	267	39	
% 1953	15.7	27.0	3.4	46.1	1.9	42.7	9.4	54.0	100		
% 1952	21.3	22.1	2.8	46.2	4.7	39.1	9.9	53.7	100		

CLASSIFICATION TABLE—NOTES.

- (1) CLASS A.—Cases in which tubercle bacilli have never been discovered in any exudate, excrement, discharge
 CLASS B.—Cases in which tubercle bacilli have been found at any time in any exudate, excrement, discharge
 GROUP 1.—Cases with slight constitutional disturbance.
 GROUP 3.—Cases with profound systematic disturbance or constitutional deterioration and with marked impairment of function, either local or general.
 GROUP 2.—All cases which cannot be placed in groups 1 and 3.
- (2) In this column are included cases (a) where death occurred immediately after notification and before the Physician had opportunity to see the patient; (b) service cases; (c) cases in mental hospitals, etc., etc.

EPILEPSY AND CEREBRAL PALSY.

cases brought to the notice of the Department are referred at the age years to the School Health Service in accordance with the provisions of 34, Education Act, 1944. In children under 5 years, 24 cases of epilepsy cases of cerebral palsy were reported and referred accordingly.

child born in 1953 was reported to be suffering from either of these

The following statement shows the numbers of children between the ages years and 16 years who were ascertained to be suffering from these

Epilepsy.

Handicapped children (a) in Soss Moss School	47
(b) attending ordinary schools but under clinic supervision	73

Cerebral palsy.

Handicapped children (a) in Margaret Barclay Residential School. .	17
(b) in Lancasterian Day Special School ..	58
(c) under orthopaedic treatment at clinics. .	13

The figures relate to children found to be suffering from these two defects do not necessarily indicate the incidence of either disease in the City as condition is notifiable. There may be, for example, children suffering so severe or so slight epilepsy or birth injury that they may never have brought to the notice of the Department, particularly children over 10 years

Residential provision for sane epileptics aged 16 years or over, of both is made under the terms of Part III, National Assistance Act, 1948, at Corporation's Langho Colony for sane epileptics. Details of the accommodation and facilities provided at this establishment are given earlier in the

HOME NURSING SERVICE.

The Manchester District Nursing Institution provides the general service of nurses under an agency agreement with the City Council. The General Secretary of the Institution and the Senior Superintendent of home nursing the necessary liaison with the appropriate officers of the Corporation and member of the Institution's Committee is also a co-opted member of the sub-committee of the Health Committee which administers the home nursing service as a whole.

The City Council has a special nursing service for home nursing of the seriously ill, the care of premature babies and the care of children under 5 years of age who require the attention of ophthalmic nurses. Suitably qualified staffs are employed for these purposes by the Health Committee and particulars of their work are included elsewhere in this report.

The following information has been supplied by the General Secretary of Manchester District Nursing Institution and gives particulars as to the work of the home nursing service for the year 1953.

A. Nursing staff.

The average number of district nurses at work was $82\frac{1}{4}$, of whom 70 whole-time and 12 part-time, giving an equivalent whole-time strength of

This figure of $76\frac{1}{4}$ is analysed into :—

(a) Nursing grades—

	1953	1952	31
Queen's Senior Superintendent of home nursing ..	1	1	
Queen's superintendents	4	4	
Queen's assistant superintendents	$2\frac{3}{4}$	$2\frac{1}{2}$	
Queen's female nurses	$32\frac{1}{2}$	$33\frac{1}{4}$	
Queen's male nurses	10	10	
Student district nurses	6	$11\frac{1}{4}$	
State registered nurses	14	12	
State enrolled assistant nurses	6	8	
	<u>$76\frac{1}{4}$</u>	<u>82</u>	

(b) Accommodation—

Resident in large district nurses' home or centre under control of superintendent	30	32
Non-resident, but working from nurses' home or centre under control of a superintendent	$38\frac{1}{4}$	36
Operating on "single" or "double" districts under ultimate control of Senior Superintendent	8	14
	<u>$76\frac{1}{4}$</u>	<u>82</u>

B. Statistics of nursing work.

Section I.

	1953	1952	Per cent. increase on 1952	Pe ir on
Patients on the books 1st January, 1953	1,707	1,399	22	
Add—new patients during 1953 ..	13,663	11,453	19	
Total patients nursed ..	15,370	12,852	20	
Deduct—patients taken off books during 1953	13,450	11,145	—	
Patients on the books 31st December, 1953	1,920	1,707	12	

Classification of nursing visits.

Medical	217,577
Surgical	45,940
Infectious diseases	4,758
Tuberculosis	23,708
Maternal complications	2,034
	<u>294,017</u>

The number of nursing visits shows an increase of 11 per cent. on 1952 and 123 per cent. on 1948.

For the fifth consecutive year, the number of patients nursed and the number of visits paid have increased despite an almost static population. This increase in 1948 coincided with the introduction of the National Health Service and it is pertinent, therefore, to enquire to what extent the remarkable increase in nursing work is due simply to the introduction of the National Health Service and to what extent other factors are responsible. The aged have for a long

ed the majority of patients of the district nurse but, clearly, the gradual of the population cannot account for an almost threefold increase of s in five years. There are evidently other factors at work than an ageing tion.

doubtedly, the introduction of the National Health Service—"free to o care to use it"—in virtue of that very principle has been responsible for er demand for home nursing, for the public now recognizes its right to vices of the district nurse. Again, because the district nursing service is "State" service the family doctor is making greater use of the district than formerly, which is a direct benefit for the patients. Much of the sed nursing work is, however, directly related to the hospitals. Patients o be discharged from hospital earlier than was customary only five years d there is, in consequence, a greater call for skilled nursing at home ; econdly, many aged sick are being nursed at home simply because there is itable hospital accommodation available for them.

her reasons for the rapid development of the service are to be found e the National Health Service as such. The changing face of medicine in st decade has had a profound influence on the technique of district g. More than half of all nursing visits today are for the purpose of giving ons of one kind or another, for example streptomycin, penicillin, and , so that many patients who formerly were hospital cases are now treated rsed in their own home. In five years the number of injections has more ounded. Again, whereas only a few years ago confinement to bed in ss and senility was a usual part of medical treatment, the modern tendency t the patient up at the earliest possible moment. This trend clearly must o earlier discharge from hospital, to a bigger turnover, and therefore to omiciliary nursing. This practice is given added weight by the rediscovery therapeutic value of the home as compared with the hospital ward.

on II. Classification of new cases.

	1953	Per cent.	1952	Per cent.	1951 Per cent.
Infectious diseases :					
(a) Influenza	103	0·8	96	0·8	1·1
(b) Primary pneumonia	556	4·1	405	3·5	3·2
(c) Broncho pneumonia	235	1·7	167	1·5	2·0
(d) Measles	16	0·1	23	0·2	0·3
(e) Whooping cough	13	0·1	16	0·1	0·1
(f) Pulmonary tuberculosis	537	4·0	300	2·6	2·1
(g) Non-pulmonary tuberculosis	40	0·3	42	0·4	0·4
(h) Erysipelas	20	0·2	23	0·2	0·1
(i) Other notifiable diseases	31	0·2	36	0·3	0·1
	1,551	11·5	1,108	9·5	9·5
(j) Diabetes	195	1·5	211	2·0	2·0
(k) Anaemias	273	2·0	199	1·5	1·5
(l) Bronchitis	1,346	10·0	954	8·0	6·0
(m) Other respiratory diseases	564	4·0	378	3·5	2·5
(n) Heart diseases	1,146	8·5	1,046	9·0	9·5
(o) Cancer	638	4·5	590	5·0	6·5
(p) Diseases of the circulatory system	352	2·5	405	3·5	4·0
(q) Diseases of the nervous system	127	1·0	106	1·0	1·5
(r) Uro-genital	111	1·0	149	1·5	2·0
(s) Complication of pregnancy	53	0·5	66	0·5	1·0
(t) Complication following childbirth	215	1·5	171	1·5	1·5
(u) Other medical cases	5,063	37·0	3,917	34·0	35·5
(v) Post-operative	576	4·0	579	5·0	4·5
(w) Varicose ulcers	155	1·0	115	1·0	1·5
(x) Other surgical	1,285	9·5	1,432	12·5	11·0
(y) Operations	13	—	27	—	—
Totals	13,663	100·0	11,453	100·0	100·0

Section III.

Age groups.

The 13,663 new cases were in the following age groups :—

Age group	1953	Per cent.	1952	Per cent.	1951 Per cent.	Per cent.
0—4	1,316	9.7	911	8.0	6.5	
5—14	1,051	7.7	838	7.3	5.1	
15—64	6,768	49.5	5,486	47.9	46.4	
65—74	2,492	18.2	2,380	20.8	22.6	}
75 and over	2,036	14.9	1,838	16.0	19.4	
Totals	13,663	100.0	11,453	100.0	100.0	

The above figures of new cases, however, do not give a true analysis of the age groups of all patients nursed during the year, since there were also patients brought forward at the beginning of the year and many of these patients are elderly and have been under the nurse's care for a long time. At any one time, approximately three-fifths of all patients nursed at home are aged 65 and over. Of this proportion two-thirds are in the age group 65—74, and one-third in the age group 75 and over. Of the two-fifths of patients who are below the age of 65, approximately one-tenth are under the age of five.

Section IV. Sources of reference of new cases.

	1953	Per cent.	Per cent.
General medical practitioners	12,535	91.8	88.5
Hospitals	809	5.9	7.1
Health Department :			
Nursing Services Division	85	} 1.0	
Tuberculosis service	43		
School medical service	6		
Welfare Services Department	13	} 1.3	
Personal applications	154		
Others	18		
Totals	13,663	100.0	100.0

C. Training.

The Institution has three training homes for the training of State registered nurses in home nursing—at Ardwick, Harpurhey and Hulme. The normal course of training is six months, but an abridged course of four months is permitted if the student holds certain midwifery or public health certificates and has a certain amount of district nursing experience.

The training consists of supervised experience of domiciliary nursing, lectures, tutorials, demonstrations, and visits of observation. The lectures and visits of observation are included in a month's special block course which is organised by the Institution not only for Manchester students but for students in the East Lancashire region. During 1953, three such courses were held and 38 students attended from such centres as Salford, St. Helens, Rochdale, Skipton, Bury, Huddersfield, Blackburn and Lancashire County, in addition to those from Manchester.

The experimental course of instruction for State enrolled assistant nurses is organised at the Bradford Home under the auspices of the Queen's Institute for District Nursing and has been continued during the year. The object of the course is to give elementary instruction in district nursing to assistant nurses, and the Bradford Home is one of two in the country which are experimenting with this instruction.

Transport.

On 31st December, 1953, 17 motor cars were in regular use "on the district" compared with 19 cars and 2 auto-cycles in 1952. Of the cars, 9 were the property of the Institution and 2 the property of the Corporation. The remaining 6 cars were owned by the nurses and an allowance granted for their

The majority of the remaining 65 nurses use bicycles and a few either walk or public transport. A survey has shown that the provision of a motor car saves a nurse who hitherto has used a bicycle or public transport to undertake the average up to one-third additional nursing visits. The car has also the advantage over all other forms of transport in that the car driver arrives at the patient's home dry and warm in all weathers, whereas in inclement weather much time and energy is lost by the cyclist and walker in dealing with clothing and in getting warm. It can be shown that, on the assumption that a car enables a nurse to undertake one-third additional visits, a car is not an expensive luxury: rather it is a real substitute for unrecruitable nurses. The year 1953 was a year of shortage of nurses. Unfortunately it coincided with a substantial increase in patients and nursing visits with the result that the visits per nurse increased from 3,600 to 4,250 whilst the case-load per nurse increased from 21 to 25½. If, in succeeding years, the shortage of district nurses continues, the provision of additional motor cars as a substitute for unrecruitable nurses will have to be contemplated.

Bedroom equipment loans scheme.

This scheme, organised by the Institution with the co-operation of the British Red Cross Society and the Manchester University Settlement, makes available the following articles for loans to patients, free—air rings; bed bottles; bed pans; bed rests; bed tables; feeding cups; hot water bottles; kidney bowls; rubber sheets; sputum mugs; steam kettles; bed sticks; bed linen (in emergency cases) and for a small weekly charge—crutches and water beds.

The district nursing centres loan out equipment only to persons being treated by them. The Red Cross and the University Settlement issue equipment to these patients and also to other persons in need provided that the application is supported by a doctor, midwife, health visitor, or district nurse. Red Cross centres are open at certain times of the day in Chorlton-on-Medlock, Crumpsall, Hurst, Newton Heath, Whalley Range, and Wythenshawe; the Manchester University Settlement is in Every Street, Ancoats.

CONVALESCENCE.

The number of patients admitted to convalescent homes has increased by 50 compared with the previous year. The numbers are 186 in the year 1952 and 236 in 1953.

The following particulars indicate the number of patients admitted to each convalescent home:—

West Hill Convalescent Home, Southport	186
Blackburn and District Convalescent Home, St. Annes ..	14
Lear Home of Recovery, West Kirby	11
Sydney House, Pensarn (mothers with children)	4
Sefton House, Birkenhead (children)	14
Jewish Blind Society's Homes	6
British Red Cross Society, Binswood Rest Home, Manchester	13
"Boarbank Hall," Grange-over-Sands	2
Total	<u>250</u>

Recommendations for convalescence are received, mainly, from the pa medical attendants, but during the year several applications have been re from hospital almoners regarding patients being discharged from hosp attending out-patients' departments

In addition to the above, children are admitted to the Dr. Garrett Me Home, Conway, North Wales, which is administered by the Health Com

Details relating to these cases and other information regarding Dr. Memorial Home are given elsewhere in this report.

HOME HELP SERVICE.

The total establishment of Home Helps was 60 full-time female emp working a 44-hour week and holding superannuable appointments. This is the same as in the previous year.

The number of full-time permanent Helps employed at 1st January, was 60 and during the year 12 were recruited and 10 resigned from the s The average number of permanent Helps employed was 58.

The number of part-time Helps recruited was 5 and the number res during the year was also 5. A total of 5 temporary full-time Helps join service and 6 resigned.

In addition to the 60 permanent Helps employed at 31st December, there was 1 temporary full-time Help and there were also 6 part-time working in the service as reliefs for those permanent Helps not on duty result of illness or holidays.

The average number of full-time Helps absent from duty as the res illness was 7 each week and of part-time Helps 1 each week. This fairl rate of sickness may be explained by the fact that in many cases the Hel engaged in heavy, dirty and difficult work which may lower their resista sickness.

The average length of time spent on each case by each Home Help weeks, but frequently assistance has to be given over longer periods whe need exists.

The demands upon the service have multiplied as it has become incre well known, but as no increase in the number of Helps employed has place, the demand has had to be met by providing a greater amount of par help. This means that the majority of the full-time Helps are engaged two or three cases of sickness, old age and infirmity each week. Confin cases are always provided with full-time assistance as part-time help is inad on these occasions.

During the year, applications for assistance were received from 1,482 l holds; 398 of these were in cases following confinement and the rem 1,084 were cases of sickness, old age and infirmity. Outstanding applic from 1952 numbered 85 confinement cases and 20 sickness cases, totallin

The sources of application for assistance in 1953 were as follows:—

Source	Number in cases following confinement		Number in cases of sickness, old age, etc.		Totals	
Written application (by letter, telephone, or visit to the office by applicant or a representative) ..	255	(322)	576	(578)	831	(900)
Welfare centres, health visitors, midwives	129	(154)	132	(96)	261	(250)
Charity almoners	12	(16)	170	(132)	182	(148)
Medical practitioners	2	(4)	116	(73)	118	(77)
Tuberculosis Centre	—	(—)	18	(20)	18	(20)
Maternity Nursing Institution	—	(—)	19	(15)	19	(15)
Home Services Department	—	(—)	16	(15)	16	(15)
Local Assistance Board	—	(—)	16	(8)	16	(8)
Home Aid Society	—	(—)	6	(—)	6	(—)
Health Section	—	(—)	4	(—)	4	(—)
Department of Social Service	—	(—)	11	(—)	11	(—)
Totals	398	(496)	1,084	(937)	1,482	(1,433)

(The figures in parentheses relate to 1st January, 1952, to 31st December, 1952.)

Of the 1,482 applications for help, 208 for confinement and 308 for sickness were cancelled by the persons concerned, and in 256 cases no actual request for help materialised after the application had been made.

The number of households assisted during the year was 769, of which 166 were in households where a confinement had occurred and 603 where there were cases of sickness, old age or infirmity. Of the latter number, 249 cases were assisted on more than one occasion and 354 cases were assisted on one occasion only, so that the number of such cases assisted over the year totalled 769, making a grand total of 1,341 occasions where help was provided in cases of confinement, old age and infirmity and sickness.

Full-time help was given in cases of sickness and old age on 102 occasions and part-time assistance on 1,073 occasions. At the close of 1953, 42 confinement and 4 sickness cases were registered as requiring attention during 1954.

Contributions towards the cost of the service are recovered from householders and such contributions, up to 31st December, 1953, have been assessed according to authorised scales of assessment which are based on the recommendations made by the Association of Municipal Corporations.

On 1st January, 1954, new scales of assessment bearing a closer relationship to the present cost-of-living index than those previously in operation, came into force.

The co-ordination of the service is effected by the Organizer, who visits the homes of persons requesting assistance and supervises the work of Home Aiders.

FAMILY WELFARE SERVICE.

The Family Welfare centres have continued their activities along the lines which they were designed. They evidently fulfil an important public need, as the level both of attendance and new cases shows no falling off. The work is not only maintained but is increasing slowly. This shows something which seems worth pointing out, namely, that the Family Welfare Service did not meet a purely temporary need of the population in the early war period, but responded to a deeper and more permanent need to help with personal and family problems beyond their competence to solve themselves as the following figures indicate:—

	Interviews.	Number of persons attending.	New cases.
1953	1,277	351	266
1952	1,261	335	240
1951	1,135	301	217

So the uninitiated the increase may not seem impressive, but it should be remembered that each case represents personal suffering of greater or less gravity, and that much time is needed to understand the situation and to give constructive encouragement and advice. The time factor is a prominent feature of the work, as the applicants must not feel rushed in putting forward their troubles. For this reason sessions are prolonged far beyond the official hour of closing, especially the Monday evening session at Ardwick, 6—8 p.m., which seldom ends before 9-30 p.m. and often later still.

As reported last year, the Service is working almost to capacity, and no spectacular growth can be expected, but it is satisfactory to note that, compared with the work in 1951, there is a definite expansion.

Three centres are functioning—at Higher Ardwick on Monday evenings, Northenden on Wednesday afternoons, and at Withington on Thursday afternoons. At the afternoon sessions the full medical staff does not attend. The work is entirely voluntary. The figures for these centres are as follows:—

	Interviews.	New cases.
Higher Ardwick centre.		
1951	716	153
1952	721	142
1953	717	140
Northenden centre.		
1951	287	37
1952	339	66
1953	335	78
Withington centre.		
1951	132	27
1952	201	32
1953	225	48

The weekly attendance at all the centres is subject to great variation, being affected by the weather, holiday periods, etc. The largest attendance in one week was 39 applicants; frequently, there are attendances of 30 or more.

The number of interviews given to any one person in a year has a range depending on the need of the applicant. Some require advice con- over a period to enable them to carry on and, in some few cases, to hospitalization. On the other hand many cases come only once or twice, particularly applies to the second partner in a marriage problem where the first partner makes the original appeal for help, and the second one is frequently invited to attend. During the year 62 couples were co-operating in solving their difficulties this way. If they come together on the first occasion they are each interviewed by a separate doctor. Later both doctors confer with the couple, and much light is shown on the problem in this way. It is possible to continue to help these couples over the period required for readjustment by transferring the wife to one of the afternoon sessions, thus releasing the time available at the evening sessions for workers who cannot attend during the day.

Of the total of 351 persons attending, 117 were men, most of whom come to the evening session at Ardwick. About 50 per cent. of these men belong to the group of higher skilled manual workers, foremen, shop managers, clerks and schoolmasters. The other 50 per cent. are semi-skilled and unskilled workers.

The unmarried women are largely shorthand typists, school teachers and others of quite good general education. Many of the married women had similar occupations, but of course persons of other grades of intelligence and education attend.

An analysis of the problems about which the applicants come for help in groups similar to those referred to last year, as follows:—

Classification of problems.

Marital disharmony	158
Maladjustment	56
Difficulties with children	47
Neurotic symptoms, depression, anxiety showing as fears, etc.	44
Borderland insanity or deluded	23
Unclassifiable, e.g. housing, etc.	23
	351

Analysis of age groups.

Under 20	20
Between 21 and 30	119
Between 31 and 40	121
Between 41 and 50	76
Over 51	4
Not ascertainable	11
	351

These age groups are significant as showing the correlation of problems with development of family life. The high percentage between the ages 20 and 40 seems to point to the problems of the early years of marriage when children arrive, and later while they are still at home.

The sources of referrals show an encouraging development and expansion:—

Marriage Guidance Council	49
Maternity and child welfare centres and health visitors	40
Self referred	39
Doctors	37
Probation officers	36
Family Welfare staff	36
Almoners	21
Child guidance clinic	18
Social workers	18
Through other applicants	14
P.S.W. Denton Rehabilitation Centre	13
Manchester Royal Infirmary	13
Clergy, Poor Man's Lawyer, Citizens' Advice Bureau, etc.	17

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The friendly relationship with the Marriage Guidance Council continues. A meeting was officially arranged by the Medical Officer of Health between the Marriage Guidance Council and representatives of the Family Welfare Service, and it was clearly shown that there is no duplication of functions in their respective functions, but that both organisations are supplying help to the community in their individual ways.

It is also encouraging to note the growing co-operation between the Service and that of the Maternity and Child Welfare service through the health visitors. The number of doctors who refer cases is increasing and almoners and hospitals have also become aware of the Service and sent 21 cases last year.

Doctors and those concerned with the welfare of the general community in other cities continue to be interested in this work. Recently special encouragement has been given by a request from the Medical Officer of Health for Bristol that his Assistant Medical Officer of Health should visit the Manchester centres and see the methods used. This is taken to be a sign that the service is not only a local appeal amongst the citizens of Manchester, but is being recognised as important elsewhere.

VENEREAL DISEASES.

Treatment of mothers and children for venereal diseases has been continued at two maternity and child welfare centres. The number of sessions has been reduced to one at each centre since it was found that facilities were available elsewhere through the National Health Service and attendances at the centres had become smaller due to that cause.

Particulars concerning attendances, new patients, and treatment are shown in the accompanying table which is in the form required in Ministry of Health returns.

Health visitors follow up defaulters from any clinic when requested and when necessary repeated visits are paid, including evening visits, and every effort is made to secure attendances for treatment.

Contact tracing continues to present difficulties owing to inadequate information given, but whenever possible all contacts referred to the Department are persuaded to attend a clinic.

The following table shows particulars of the work done during the year:-

	Syphilis		Gonorrhoea		*Other Conditions		Tot	
	M.	F.	M.	F.	M.	F.	M.	F.
1. Number of patients on 1st January under treatment or observation	7	88	—	—	25	57	32	1
2. Number of patients removed from the register during any previous year which returned during the year under report for treatment or observation of the same condition	—	5	—	—	—	—	—	—
3. Number of patients dealt with for the first time during the year under report (exclusive of those under Item 4) suffering from:—								
(a) Syphilis, primary	—	—	—	—	—	—	—	—
(b) " secondary	—	—	—	—	—	—	—	—
(c) " latent in 1st year of infection †	—	—	—	—	—	—	—	—
(d) " cardio-vascular*	—	—	—	—	—	—	—	—
(e) " of the nervous system*	—	—	—	—	—	—	—	—
(f) " all other late or latent stages*	—	12	—	—	—	—	—	—
(g) " congenital (under 1 year)	—	—	—	—	—	—	—	—
(h) " " (over 1 year)	—	2	—	—	—	—	—	—
(i) Gonorrhoea	—	—	—	3	—	—	—	—
(j) Chancroid	—	—	—	—	—	—	—	—
(k) Lymphogranuloma venereum	—	—	—	—	—	—	—	—
(l) (Syn. Lymphogranuloma inguinale)	—	—	—	—	—	—	—	—
(m) Granuloma inguinale	—	—	—	—	—	—	—	—
(n) (Syn. Granuloma venereum)	—	—	—	—	—	—	—	—
(o) Non-gonococcal urethritis (males only)	—	—	—	—	—	—	—	—
(p) Any other conditions requiring treatment	—	—	—	—	1	74	1	—
(q) Conditions not requiring treatment	—	—	—	—	92	204	92	20
(r) Conditions remaining undiagnosed at 31st December	—	—	—	—	—	—	—	—
4. Number of patients dealt with for the first time who have been transferred from other Centres (civil or Service) or from practitioners approved under Ministry of Health Circular 2226	—	1	—	—	—	—	—	—
Totals of Items 1, 2, 3 and 4	7	108	—	3	118	335	125	44
5. Number of patients suffering from syphilis and gonorrhoea discharged after completion of treatment and the final tests of cure, or who were diagnosed as "other conditions"	3	24	—	—	106	301	109	32
6. Number of patients suffering from:—								
(a) Syphilis who defaulted after completion of treatment, but before final discharge	—	14	—	—	—	—	—	1
(b) Gonorrhoea who defaulted before 3 months	—	—	—	—	—	—	—	—
(c) Gonorrhoea who defaulted after 3 months	—	—	—	1	—	—	—	—
7. Number of patients who ceased to attend before completion of treatment and were suffering from:—								
(a) Acquired syphilis of less than 1 year's duration	—	—	—	—	—	—	—	—
(b) Acquired syphilis of more than 1 year's duration	—	16	—	—	—	—	—	1
(c) Congenital syphilis (under 1 year)	—	—	—	—	—	—	—	—
(d) " " (over 1 year)	1	—	—	—	—	—	1	—
(e) Gonorrhoea	—	—	—	—	—	—	—	—
8. Number of patients under treatment or observation known to have died:—								
(a) From syphilis	—	—	—	—	—	—	—	—
(b) From treatment	—	—	—	—	—	—	—	—
(c) From other causes	—	—	—	—	—	—	—	—
9. Number of patients transferred to other Centres or Institutions or to private practitioners	1	3	—	—	—	—	1	—
10. Number of patients remaining under treatment or observation on 31st December	2	51	—	2	12	34	14	8
Totals of Items 5, 6, 7, 8, 9, and 10	7	108	—	3	118	335	125	44
(These totals should agree with those of Items 1, 2, 3, and 4).								
11. Number of patients included in Item 7 who failed to complete one course of treatment of either penicillin or of arsenic and bismuth and were suffering from:—								
(a) Acquired syphilis of less than 1 year's duration	—	—	—	—	—	—	—	—
(b) Acquired syphilis of more than 1 year's duration	—	3	—	—	—	—	—	—
(c) Congenital syphilis of less than 1 year's duration	—	—	—	—	—	—	—	—
(d) Congenital syphilis of more than 1 year's duration	—	—	—	—	—	—	—	—

	Syphilis		Gonorrhoea		Other Conditions		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	Totals
Number of attendances :—									
(a) for individual attention by the physician	28	910	—	11	166	799	194	1,720	1,914
(b) for intermediate treatment, e.g., dressings, etc.	—	—	—	—	—	—	—	—	—
Total attendances	28	910	—	11	166	799	194	1,720	1,914

	Under 1 year		1 and under 5 years		5 and under 15 years		15 years and over		Totals	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Number of patients suffering from latent syphilis in Item 3 above and according to age	—	—	—	—	—	—	—	1	—	1

	Microscopical		Cultural	Serum		†† Cerebro-spinal fluid	Others
	for Syphilis	for Gonorrhoea		for Syphilis	for Gonorrhoea		
	Number of specimens examined at, and by the physician of, the Treatment Centre	—	—	—	—	—	—
Number of specimens from patients at the Treatment Centre sent to a pathological laboratory	—	406	—	683	24	—	—

	Syphilis (less than 1 year)		Syphilis (more than 1 year)		Gonorrhoea		Other Conditions	
	M.	F.	M.	F.	M.	F.	M.	F.
Number of patients attending for examination through Agency of :—								
Patients	—	—	—	—	—	—	—	—
Health visitor or Social Service worker	—	—	—	—	—	—	—	—
Totals	—	—	—	—	—	—	—	—

In order to avoid duplication, patients with cardio-vascular syphilis who are also suffering from syphilis of the nervous system should be recorded as suffering from cardio-vascular syphilis alone.

"Syphilis, latent in first year of infection," applies to cases presenting no clinical sign of syphilis but considered (e.g. reversal of positive blood findings after treatment) to have contracted this disease within the preceding 12 months.

The number of diagnostic lumbar punctures should be given, not the number of tests carried out.

ry Services Division

INTRODUCTION

WATER SUPPLY

FOOD SUPPLY:

Hygiene

Milk and ice cream control

Adulteration

Meat (Markets Department)

SMOKE ABATEMENT:

Industrial

Smokeless areas

Recording of atmospheric pollution

HOUSING CONDITIONS:

Disrepair

Post-war Clearance Areas

Pre-war Clearance Areas

Individually unfit houses

Re-housing: medical circumstances

Abatement of overcrowding

Houses let-in-lodgings

Common lodging-houses

Caravan dwellings

Canal boats

OCCUPATIONAL CONDITIONS:

Factories

Factory outworkers

Shops and employment of young persons

GENERAL SANITARY CONDITIONS

Infectious diseases and food poisoning

Rodent control

Eradication of insect pests

Drainage works (Defects and repairs)

Sanitary accommodation

Tipping of refuse

Offensive trades

Effluvium nuisances

Noise

Land used for pleasure fairs

Rag flock and other filling materials

Export of washed rags and second hand clothing

Exchange of toys for rags

Swimming baths

Establishments for massage or special treatment

Hairdressers and barbers

Sale of certain poisons

Public mortuaries

Exhumations

PUBLIC CONVENIENCES

PUBLIC ANALYST

SANITARY SERVICES DIVISION.

J. Graham, F.S.I.A., M.R.S.I., Chief Sanitary Inspector.

The work of this division of the Department, being concerned with the essentials of "environmental sanitation," defined by the World Health Organisation to mean "the control of all those factors in man's physical environment which exercise or may exercise a deleterious effect on his physical development, health and survival," is particularly directed to the basic elements of clean water, air, food, housing and general sanitary circumstances.

The interdependence of these factors was recognised in the reorganisation of the Department, in 1952, with the merging of the sections which prior to that had separately dealt with housing survey, milk control and rodent infestations respectively. The co-ordination of those activities within the one Sanitary Services Division has proceeded effectively.

Unfortunately, the pressing problem of deficiencies in the number of district sanitary inspectors (at the end of the year there was a deficiency of 32 per cent. with the likelihood of the rate increasing) with a most embarrassing turnover of staff has continued to be a serious handicap to the efficient performance of their duties. Accordingly, with a view to remedying the situation, recommendations made by the Committee on the salaries of sanitary inspectors are under consideration by the Establishment Committee at the end of the year.

The whole subject of the recruitment, training and qualifications of sanitary inspectors in England and Wales was reported upon during the year by a Working Party set up by the Minister of Health under the chairmanship of Mr. John Maude, K.C.B., K.B.E. The investigation produced a most comprehensive document forming the first authoritative survey of the training for and duties of sanitary inspectors and provided a wealth of factual data and considered conclusions on changes deemed necessary. In general, the conclusions of the report are in full accord with the experience of the Sanitary Services Division in Manchester and implementation of its terms by the Minister of Health and other authorities concerned would be to the ultimate benefit of all Sanitary Authorities.

In August, Mr. J. Lawson, who had held the office of Chief Sanitary Inspector for 7 years, retired after 29 years service as a sanitary inspector in the Department. His period of service as the Chief Inspector was one of great effort under the exceptionally difficult circumstances of the post-war period. It was especially concerned with new local act powers dealing with the abatement of the "central smokeless area," the operation of prior approval for the erection of boiler plant and the registration of food hawkers, which form worthy examples of legislation initially of local application only, becoming nationalised to be of national significance and value.

Mr. G. P. Tanner, district sanitary inspector, was awarded fellowship of the Sanitary Inspectors' Association for his thesis on "Delicatessen Food," whilst Mr. C. Arran, secured the Keeley Prize, awarded annually in a competition held by that Association for the best paper on some aspect of general sanitary administration. His paper dealt with "The case for local Legislation."

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Water.

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Factory canteens
Bakehouses
Food preparation premises
Markets re sale of food
Shops re sale of food
Hotels, beerhouses
Food poisoning
Hawkers of food and storage premises
To obtain samples of food and drugs
To farms taking "Appeal to Cow" samples
To registered premises of wholesale margarine dealers
Farms
Dairies
Pasteurising and sterilising premises
Hospitals, schools and day nurseries
Shops selling bottled milk,
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Premises used for the manufacture of ice cream
Premises used for the sale of ice cream

Smoke abatement.

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Housing conditions.

Primary inspections of dwelling houses under the Public Health Act, 1936
Subsequent inspections of dwelling houses under the Public Health Act, 1936
Primary inspections of dwelling houses under the Housing Act, 1936
Subsequent inspections of dwelling houses under the Housing Act 1936
Overcrowding
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Houses-let-in-lodgings
Common lodging houses
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WATER SUPPLY.

Water for the City is obtained, mainly, from Thirlmere and Hawes in the Lake District, augmented by a further supply of approximately 20 million gallons each day obtained from the Longdendale Valley reservoirs, 18 miles east of Manchester.

Distribution is effected from service reservoirs and by trunk mains, but being used to maintain the pressure in the high level districts. The reservoirs are at Prestwich, Heaton Park, Audenshaw, Godley, Denton, and Bowdon.

Samples of the water were obtained as a routine measure or for complaints at dwelling-houses, hospitals, dairies, factories or business premises and submitted for bacteriological and chemical examinations. A total of 66 bacteriological and 65 chemical samples were obtained, and 35 complaints were investigated. Unsatisfactory conditions were found in 18 of the samples. The following table summarises the bacteriological results of the 66 samples examined:—

District	No. of samples	Samples free from coliform bacteria	Faecal coli found		Non-faecal coli found		Service reservoir or aqueduct
			No. of samples	No. per 100 mls.	No. of samples	No. per 100 mls.	
Ardwick	2	2	—	—	—	—	Audenshaw
Baguley	1	—	—	—	1	1	Thirlmere aqueduct Godley
Beswick	1	1	—	—	—	—	Heaton Park
Blackley	6	6	—	—	—	—	Heaton Park
Bradford	2	—	—	—	2	1: 1	Audenshaw
Burnage	2	2	—	—	—	—	Audenshaw
Cheetham	3	3	—	—	—	—	Prestwich
Chorlton-cum-Hardy	1	1	—	—	—	—	Audenshaw
Chorlton-on-Medlock	3	2	—	—	1	5	Audenshaw
Crumpsall	4	4	—	—	—	—	Heaton Park
Didsbury	3	3	—	—	—	—	Audenshaw
*Fallowfield	2	1	1	1	1	1	Audenshaw
Gorton	1	1	—	—	—	—	Audenshaw
Harpurhey	2	2	—	—	—	—	Heaton Park
*Hulme	1	—	1	1	1	4	Audenshaw
Levenshulme	1	1	—	—	—	—	Audenshaw
Longsight	1	1	—	—	—	—	Audenshaw
Miles Platting	3	3	—	—	—	—	Godley
Moss Side	1	1	—	—	—	—	Audenshaw
*Moston	5	2	1	2	3	1: 1: 50	Heaton Park
Newton Heath	4	4	—	—	—	—	Godley
Northenden	2	2	—	—	—	—	Thirlmere aqueduct Godley
Openshaw	1	1	—	—	—	—	Thirlmere aqueduct Godley
*Whalley Range	3	2	1	25	1	50	Audenshaw
Withington	11	3	—	—	8	4 (1) 2 (17) 2 (25)	Audenshaw

NOTE.—*One sample contained both faecal and non-faecal coli.

The Engineer and Manager of the Waterworks Department was informed the results of all the samples reported to be unsatisfactory and, in each of these cases, further samples were obtained. All the follow-up samples were found to be satisfactory.

The water supply from an artesian well at a works in Didsbury was examined and found to be satisfactory.

Periodic reports on the condition of Manchester's water supply were furnished by the Engineer and Manager of the Waterworks Department to the Local Officer of Health.

The Engineer and Manager of the Waterworks Department has supplied the following information in connection with Manchester's water supply:—

The water supply has been satisfactory both in quality and quantity.

Regular samples are taken for bacteriological examination of the raw water and of the treated water going into supply. Of the 624 samples examined, 542 were found to be free from bacteria. Typical chemical analyses of the sources of supply are given later in this report.

The Thirlmere and Longdendale supplies are treated with hydrated lime. This has proved effective in limiting the maximum lead content found in samples given overnight contact with lead service pipes to less than 0.2 parts per million.

It has proved impracticable to prevent access of seagulls to the larger service reservoirs. Pollution from this source is dealt with by chlorination at the outlets of the reservoirs.

The number of dwelling-houses supplied is 209,819 and the estimated population 701,800. All dwelling-houses are supplied from water mains.

TYPICAL ANALYSES.

1) THIRLMERE AND HAWESWATER LAKES.

The supply from these lakes is subject only to slight variation and the following are typical analyses:—

	Thirlmere	Haweswater
pH value	6.0	6.6
Colour p.p.m. platinum	12	7
Turbidity p.p.m.	2.5	0.8
	<i>Parts per million</i>	
Total solids dried at 180°C.	30	36
Free acidity as CO ₂	4	1
Alkalinity as CaCO ₃	5	10
Total hardness as CaCO ₃	11	17
Chlorides as Cl ₂	7	5
Nitrates as N ₂	0.17	0.15
Ammoniacal nitrogen as N ₂	0.02	0.02
Albuminoid nitrogen as N ₂	0.03	0.05
Oxygen absorbed test, 4 hours at 27°C.	0.78	0.72
Silica as SiO ₂	2.5	2
Iron as Fe	0.06	0.05
Manganese as Mn	nil	nil

THIRLMERE SUPPLY. As taken from house taps.

	Date	October 14th
	April 8th	
	Lab. no.	4079
pH value	3906	6.9
Colour as p.p.m. platinum	7.1	13
Turbidity p.p.m.	9	1.6
Odour: Cold	1.8	nil
Hot	nil	nil
Taste: Cold or hot	faint earthy	nil
	nil	nil

Total solids dried at 180°C.	40
Free acidity as CO ₂	1.5
Alkalinity as CaCO ₃	14
Total hardness as CaCO ₃	19
Chlorides as Cl ₂	8.5
Nitrates as N ₂	0.16
Nitrites as N ₂	nil
Ammoniacal nitrogen as N ₂	nil
Albuminoid nitrogen as N ₂	0.02
Oxygen absorbed test, 4 hours at 27°C.	0.54
Silica as SiO ₂	2
Iron as Fe	0.11
Manganese as Mn	nil

(3) LONGDENDALE AQUEDUCT SUPPLY. *Raw water.*

This supply is subject to wide fluctuations during the year as indicated by the results:—

pH value	4.0	to	6.3
Colour as p.p.m. platinum	17	to	66
Turbidity as p.p.m.	3	to	16
	Parts per million		
Total solids dried at 180°C.	60	to	75
Free acidity as CO ₂	4	to	10
Alkalinity as CaCO	nil	to	8
Total hardness as CaCO ₃	24	to	32
Chlorides as Cl ₂	8	to	10
Nitrates as N ₂	0.40	to	0.6
Ammoniacal nitrogen as N ₂	0.02	to	0.0
Albuminoid nitrogen as N ₂	0.05	to	0.0
Oxygen absorbed test, 4 hours at 27°C.	0.95	to	3.14
Silica as SiO ₂	6	to	10
Iron as Fe	0.18	to	0.5
Manganese as Mn	0.08	to	0.1

(4) LONGDENDALE AQUEDUCT WATER SUPPLY. *Taken as leaving Godley Reserve*

	Date	April 21st	Novem
	Lab. no.	3914	412
pH value		7.7	7.
Colour as p.p.m. platinum		25	56
Turbidity p.p.m.		10.5	9.
Odour. Cold		nil	nil
Hot		faint earthy	faint e
Taste. Cold		nil	nil
Hot		faint earthy	nil

	Parts per millio	
Total solids dried at 180°C.	92	80
Free acidity as CO ₂	1.5	1.
Free alkalinity as CaCO ₃	nil	nil
Total alkalinity as CaCO ₃	16	10
Total hardness as CaCO ₃	40	34
Chlorides as Cl ₂	11	8
Nitrates as N ₂	0.41	0.
Nitrites as N ₂	nil	nil
Ammoniacal nitrogen as N ₂	0.24	0.
Albuminoid nitrogen as N ₂	0.06	0.
Oxygen absorbed test, 4 hours at 27°C.	1.36	3.
Silica as SiO ₂	8	7
Iron as Fe	0.18	0.
Manganese as Mn	0.17	0.

NOTE.—This supply is sterilised by the chloramine process, which acco
bulk of the ammoniacal nitrogen present. Traces of nitrites, when
derived from this treatment, also.

PLUMBO-SOLVENCY.

THIRLMERE SUPPLY.

The untreated water has a fairly low plumbo-solvent action, but the water is neutralised with hydrated lime at the head works to raise the pH value of the distributed supply to 7.0 to 7.5. Plumbo-solvency tests have not been carried out this year, but past records indicate that lead content in water which has stood in contact with lead service pipes overnight is definitely less than 0.2 p.p.m. as Pb.

LONGDENDALE SUPPLY.

The untreated water has a marked plumbo-solvent action. It is treated with hydrated lime to raise pH value on distribution to 7.0 or over. Plumbo-solvency tests have not been carried out this year, but past records show that water which has stood in contact with lead service pipes overnight has a lead content not exceeding 0.2 p.p.m. as Pb.

BACTERIOLOGICAL REPORT. AQUEDUCTS AND SERVICE RESERVOIRS.

	Total number of samples	Samples free from coliform bacteria	Faecal coli present		Non-faecal coli present	
			No. of samples	No. per 100 mls.	No. of samples	No. per 100 mls.
<i>Aqueducts</i>						
Thirlmere	3	3	0	—	0	—
Longendale.. .. .	50	9	36	1-600	33	1-250
<i>Service Reservoirs</i>						
Audenshaw No. 1 ..	22	1	17	1-900	17	1-900
" No. 2	22	2	17	1-1800+	16	1-900
" No. 3	21	2	17	1-1800+	16	1-350
Heaton No. 1	14	6	5	1-8	7	1-5
" No. 2	13	8	4	1-25	5	1-35
Godley inlet	50	45	1	1	5	1-8
" outlet	51	42	3	1-2	7	1-13
Heaton Park	25	1	24	1-600	18	1-600
Twicken No. 1 ..	26	21	3	1	4	1-13

Water from Haweswater and Thirlmere lakes is chlorinated in the aqueducts near the headworks. It is re-chlorinated before it enters the Manchester area of supply. Results for the supply distributed direct from the Thirlmere aqueduct are given in the next table.

The Longendale aqueduct results given above are prior to chlorination. The water is chlorinated before it enters the Godley reservoir and sufficient chlorine (as chloramine) is added to maintain a chlorine residual in the water leaving the reservoir.

Godley outlet represents the water entering the distribution system. Of the 3 samples containing faecal coli, only 1 contained 2 coli per 100 mls., and the 3 samples were well separated in time. The 7 samples with non-faecal coli were as follows:—

- 4 samples with only 1 non-faecal coli per 100 mls.
- 3 samples with 3, 5 and 13 coli (non-faecal) respectively.

Samples with 13 and 5 coli were collected within 2 days of each other, and repeat was free.

The very high coli counts in Audenshaw and Heaton Park reservoirs are due to contamination arising from gulls.

BACTERIOLOGICAL REPORT. CHLORINATED WATER SUPPLIES ON DISTRIBUTION.

	Total number of samples	Samples free from coliform bacteria	Faecal coli present		Non-faecal coli present	
			No. of samples	No. per 100 mls.	No. of samples	No. per 100 mls.
Audenshaw	131	108	8	1-3 a	22	1-50 a
Heaton	66	61	0	—	5	1-3
Godley	84	76	0	—	8	1-5 b
Heaton Park	118	90	12	1-450 c	26	1-450 c
Twicken	89	74	0	—	15	1-170 d
Thirlmere aqueduct ..	136	133	0	—	3	1-8 e
Total	624	542	20	—	79	—

NOTES:—

- (a) Disturbed mains conditions in certain areas under waste detection, etc., the first two weeks in July caused 4 samples to contain 1, 2, 2 and 8 coli per 100 mls. These were taken on four separate days and other taken on the same days were free from coli. 14 samples taken in this were free from coli.

General flushing of mains has not been carried out for a number of years in order to conserve water. Flushing was re-commenced about the end of June and this caused a marked deterioration in the bacteriological quality of the water in the disturbed areas, due to coliform bacteria derived from "aftergrowths" in deposits in the mains being transferred to the distributed water. Such coli are not derived from any pollution entering the mains. Chlorine residuals normally carried in the water are insufficient to kill the coli transferred to the water issuing from the taps under such disturbed conditions. It should be pointed out that it is impossible to maintain such an amount of chlorine in the water supply as will ensure that these deposits which contain varying amounts of organic matter, are sterile, or to prevent these "aftergrowths"; if that were attempted, there would be a general outcry from the public regarding chlorinous odours and tastes.

The effect of flushing was apparent during the month of September when 13 samples out of 24 taken contained coliform bacteria essentially non-faecal types. The results were as follows:—

Faecal coli present. 7 samples.			
2	samples with	1	coli per 100 mls.
2	"	2	" " " "
3	"	3	" " " "
Non-faecal coli present. 13 samples.			
5	samples with	1	coli per 100 mls.
2	"	2	" " " "
2	"	3	" " " "
1	sample	12	" " " "
2	samples	25	" " " "
1	sample	50	" " " "

The 11 samples free from coli in this month were collected from undisturbed areas on the same days as the above samples were taken, indicating that the general supply was bacteriologically excellent.

To assist in maintaining the bacteriological quality of the water to the desired standard, the chlorine dose was increased to 0.6 p.p.m. from the end of July to the end of the year. Previously it was 0.4 p.p.m.

October, November and December samples were almost back to the standard of 29 samples, 5 showed coli, as follows:—

1	sample showed	1	faecal coli per 100 mls.
3	samples	1	non-faecal coli per 100 mls.
1	sample	3	" " " " "

- (b) This supply is only slightly affected by "aftergrowths.". Six of the 8 samples with coli were collected during the warm period of July and August. The remaining 2 found, all non-faecal types, were as follows:—

5	samples with	1	coli per 100 mls.
2	"	2	" " " "
1	sample	5	" " " "

The sample with 5 coli was taken on the same day as 2 other samples which were free from coli.

- (c) About half the samples on this supply have been taken at a booster station for consumption. This sampling point is 1 mile from the chlorine plant and the contact time with chloramine between treatment and sampling is 15 minutes. Chlorine dose is 0.3 to 0.4 p.p.m. and residual chlorine at this sampling point is generally 0.10 to 0.25 p.p.m. depending upon treatment and temperature of the water.

Out of 55 samples collected at this point, 4 gave high faecal coli counts despite the presence of 0.10 to 0.15 p.p.m. residual chlorine. These results are as follows:—

Jan. 12th Faecal coli 90, total coli 90 per 100 mls.

Another sample on distribution the same day was free from coli. 4 repeat samples on each of the following two days were also free from coli.

Reservoir: faecal coli 90, total coli 90.

ar. 23rd. Faecal coli 13, total coli 13 per 100 mls.

3 repeat samples next day were all free from coli.

Reservoir: faecal coli 8, total coli 8.

Oct. 5th. Faecal coli 13, total coli 14 per 100 mls.

Repeat samples gave:

Booster station, 1 faecal coli, total coli 4.

Distributed water—2 samples with non-faecal coli each.

Reservoir: faecal coli 250, total coli 850.

Oct. 12th. Faecal coli 450, total coli 900 per 100 mls.

Repeat samples:

13th. Faecal 2, total coli 3 (booster station).

“ 0, “ “ 2

“ 0, “ “ 2

“ 25, “ “ 38

14th. “ 0, “ “ 0

16th. “ 0, “ “ 2

“ 0, “ “ 1

“ 0, “ “ 1 (booster station)

Reservoir: faecal coli 250, total coli 600.

Action taken—reservoir treated with copper sulphate and chlorine increased despite possibility of tastes in supply.

The counts on January 12th and March 23rd are unaccounted for; that of the 5th October may be due to the very high coli count of the reservoir water and the chlorine dose being barely sufficient to sterilise the water in the time of contact. The count on 12th October, despite chlorination, is higher than that in the reservoir and it would appear to be due to a heavy local gull pollution at or near the outlet well and the chlorine treatment could not deal with it. The high count on 13th October was for a sample taken a good distance from this booster station and would probably represent a remnant of the polluted water of the previous day.

There was no interruption in the chlorine treatment to account for any of these results, as confirmed by the finding of 0.10 to 0.15 p.p.m. chlorine at time of sampling.

Excluding the 14 samples with coli mentioned above, the remainder of the samples with coli were as follows:—

Faecal coli present. 5 samples.

1 sample with 1 coli per 100 mls.

4 samples with 3 coli per 100 mls.

Non-faecal coli present. 14 samples.

8 samples with 1 coli per 100 mls.

1 sample “ 2 “ “ “ “

3 samples “ 3 “ “ “ “

1 sample “ 5 “ “ “ “

1 “ “ 7 “ “ “ “

These coli were derived from “ aftergrowths ” in deposits in mains and the majority of them were caused through flushing of mains, the faecal coli being present with the non-faecal ones.

(d) Due to distribution conditions, reversal of flow in certain mains occurred for many days in mid-June. This, as well as reverting to normal flow directions, caused serious disturbances of sediment in mains, causing bacteria of non-faecal coliform types to be found in the distributed supply during the period 22nd June to 1st July. Seven samples contained from 5 to 170 non-faecal coli per 100 mls. On this particular supply, faecal coli were not found under these conditions. During this period, the reservoir water was free from all coli, even prior to chlorination. Even so, the chlorine treatment was increased to help recovery to normal. Odd samples in undisturbed areas were free from coli.

During the second half of the year 8 samples contained non-faecal coli, as follows:—

5 samples with 1 coli per 100 mls.

1 sample “ 3 “ “ “ “

1 “ “ 5 “ “ “ “

1 “ “ 13 “ “ “ “

The 5 and 13 coli counts were obtained in August probably as the result of flushing, but other samples taken on the same days were free from coli. All these would be due to “ aftergrowths ” in deposits and not to pollution entering the mains.

- (e) Three samples contained 1, 5 and 8 non-faecal coli per 100 mls. The with 5 and 8 coli were taken on the same day in July and the result was through disturbance of deposit in a main. Another sample on the was free from coli.

GENERAL.

This year the resumption of general flushing of mains has caused samples, more especially in three supplies, to contain higher counts of coliform bacteria of essentially non-faecal types. As pointed out these coliform bacteria are due to aftergrowths in deposits in mains during warmer months of the year and they are not indicative of pollution of mains. It should also be pointed out that samples taken from distal mains represent a very small fraction of the general supply at any one time.

Chlorination of the supplies has been continuous during the whole year. The general water supply has given the following results:—

Samples free from all coli	86.9
Samples free from faecal coli	96.8
Samples free from or containing not more than 3 faecal coli per 100 mls.	99.4

The water supply has been maintained at a satisfactory bacteriological standard.

BACTERIOLOGICAL REPORT.

ADDITIONAL RESULTS.

	Total number of samples	Samples free from coliform bacteria	Faecal coli present		Non-faecal
			No. of samples	No. per 100 mls.	No. of samples
<i>Service reservoirs</i>					
Bowdon	14	5	2	1—2	9
Gorton upper	13	4	5	1—90	8
Gorton lower	13	3	6	1—180+	9
<i>Chlorinated supplies</i>					
Bowdon	102	46	15	1—35	56
Denton purification plant	60	49	4	1—26	10

NOTES:—

- (a) The scraping and re-lining of certain mains in the area caused a general disturbance in deposits in adjoining mains due to increased flow and reversal of flow. Later in the year resumption of general flushing of mains caused disturbances. These conditions caused coliform bacteria due to "aftergrowths" in mains deposits to be found in the distributed water. Results were limited to the areas disturbed. The highest faecal coli counts were 11, 25 and 35 per 100 mls. The highest non-faecal coli counts were 110, 160, 180, 900 and 900 per 100 mls. These results bear no relation to reservoir water, the results of which are given above prior to chlorination. Chlorine treatment was stepped up to correct the conditions as soon as possible.
- (b) These results are again due to "aftergrowths" in mains deposits caused by two reversals of flow within 7 days arising from examination of a large main.

Comments of the Medical Officer of Health on the water supply.

The presence of coliform organisms in the types and numbers cannot be regarded as being in any way detrimental in so far as the health of the community is concerned, but they do represent a potential danger in that a water supply which contains coliform organisms might at some time or other contain pathogenic organisms.

the opinion of Dr. E. V. Suckling in his text book on water supplies is with approval: ". . . it must be clearly understood that no coliform bacteria should be present in 100 c.c. quantities of waters which have received bactericidal treatment, such as chlorination".

The water supplies of the Manchester undertaking do not reach that standard.

On the question of pollution by gulls, Dr. Suckling has stated: "The presence of *Bact. coli* in moorland, upland and lake waters is often excused on the ground of pollution by the excreta of animals and birds, but there are numerous sources in this country from which human contamination can now be completely excluded. Moreover, whilst human pollution is of chief importance, animals and birds must be considered as potential agents in the spread of disease to man by the pollution of water supplies. Gulls have already received special mention. The habits of these birds are filthy. They frequent sewage works and may then visit reservoirs and cause serious pollution of the water. They may infect the water with such disease-producing organisms as *Salmonella* and paratyphoid bacteria. The salmonella or food-poisoning bacteria which affect man may have their origin from animals, such as swine and rodents, and from the excrement thereof gain access to water".

The Medical Officer of Health is conscious of and appreciative of the high standards of efficiency and the unremitting vigilance of the Waterworks Department. He is also aware of the enormous difficulties and costs involved in securing complete safety of the water supplies. He knows, too, that these matters are under constant review and that every endeavour is being made and every effort made to achieve feasible remedies, including comprehensive works of an important nature for the protection of the Longdendale supply already approved by the Waterworks Committee. Nevertheless, the present position does cause some concern.

FOOD SUPPLY.

In some years, mainly by reason of the incidence of food poisoning, considerable attention has been focused on the desirability of providing an effective legislative control of the conditions in which food is manufactured, stored or sold. In particular, this need has been described by the different working party reports on catering and manufactured meat products, and during the year under review, the Food Hygiene Division of the Ministry of Health issued a handbook on the promotion of hygiene in premises, equipment and methods of handling food.

This publication, with a practical approach, collates well-founded experience and advice. Its detailed application of basic hygienic principles to catering and similar food premises may be regarded by some traders as stressing the technical side; nevertheless, the handbook's recommendations deserve to be noted and need to be observed by all engaged in the food trades.

In the latter part of the year a Food and Drugs Amendment Bill promoted by the Government received its second reading.

Its clauses, directed to securing hygienic conditions, are enabling provisions whereby the Ministers concerned would have regulation-making power to deal with details, including those of the structure, equipment and cleanliness of food premises and trade practices. In addition, other clauses would extend to other types of food businesses the existing provisions requiring the registration of premises used for the manufacture or sale of ice cream, or the manufacture of potted or preserved meat or fish and other preserved foods. The licensing of the sale of food elsewhere than in premises would be required by regulations providing a control evidently comparable with that applied since 1911 in Manchester under the Corporation Act of that year. Clauses also deal with the control of injurious ingredients, food labelling and advertisement, and "substitute cream."

Prior to the introduction of the Bill, the City Council had approved the recommendations of the Health Committee that more effective control of the conditions in which "imitation cream" is manufactured or sold in the City should be obtained, and, for that purpose, a clause has been included in the Corporation Bill which was promoted during the latter part of the year.

Another clause in the Corporation Bill seeks power to require the licensing of poultry killing and dressing premises in the City with a view to ensuring that such business is carried on only under suitable conditions.

Supervision of the wide range of types of businesses engaged in the preparation or sale of food in the City has continued with particular reference to restaurants, snack bars, canteens and bakehouses. 2,655 inspections were made. It must be admitted, however, that with prevailing inspection deficiencies previously mentioned, increasing reliance had to be placed on information from the public directing the attention of inspectors to premises where their services would seem to be most required.

Concerning any proposed establishment of food businesses, the liaison with the local office of the Ministry of Food has continued to operate whereby applicants are referred to the Department for certification as to the suitability of the premises and equipment. 38 were dealt with during the year. This is of mutual value to applicants in providing them with information at an early onset as to the Department's requirements, and to the Department in securing prompt observance of suitable conditions for the particular food business concerned. Similar advantages accrue from the practice of the City Architect's Department of forwarding to the Sanitary Services Division of the Department all plans dealing with proposed food premises for any observations deemed necessary.

In the course of their visits to established businesses, the sanitary inspectors have stressed the essential need for food to be kept clean, cool and covered, and especial regard paid to the cleanliness of the hands, whilst also directing attention to the general cleanliness of rooms, crockery, cutlery and equipment.

In this latter regard, in some kitchens it does seem that, where dish-washing machines are in use, failure of personnel to carry out manufacturers' instructions nullifies advantages of that mechanical method so far as cleanliness is concerned. It was not uncommon for an inspector to find filmed and streaked crockery after mechanical "washing" and that the need for both adequate quantity and frequency of change of wash-water and the correct use of suitable deter-



FOOD SERVICE TRICYCLE WITH FACILITIES FOR WASHING HANDS.

not been carried out. One operator thought that the wash-water was fed automatically. Others had no knowledge as to the correct maintenance of their machines. Whilst it is true that this human fallibility is present in any food, mechanical or otherwise, its impact on machine washing is accentuated by the difficulties experienced by caterers in frequent changes of personnel.

The failure of the management of one factory canteen to comply with the requirements of the Department in the provision of a piped supply of hot water at kitchen sinks, the installation of a wash-hand basin, the proper ventilation of the food store and the display of the notice required by the Food Byelaws relating to hand washing, caused proceedings to be taken at the City Magistrates' Court. An undertaking to carry out the necessary work was then accepted, and fulfilled.

The absence of cleanliness of premises in 61 instances and defects at 39 premises attracted prompt attention by the managements involved. Similarly, 47 warnings for minor infringements at premises registered for the preparation and manufacture of preserved food (there are 496 such premises registered in the City) were complied with. Seventy-four warnings were necessary in respect of the conditions found during inspections of 506 bakehouses in the City. Vendors were also warned for failing to take reasonable steps to prevent risk of contamination of unwrapped bread and confectionery contained in vans which were being driven with the rear shutters open.

A rapid unusual infestation occurred at four separate City restaurants. Large numbers of fruit flies (*drosophila*) were found in November and December during a period of unseasonable mild weather. The basement premises were affected and the managements concerned had ineffectively endeavoured to eradicate the infestations by the use of insecticidal spray in the premises. The sanitary inspector found that the sources of breeding were in the debris of rainwater gutters at the base of the light areas of the buildings; debris including food litter thrown from the windows of the upper floors and fruit flies being attracted to the kitchens below. Cleaning of these gutters had not been done, the use of insecticidal spray in the premises eradicated the infestations without any recurrence.

There are 550 persons registered under the provisions of Section 41 of the Manchester Corporation Act, 1946, for the sale of food from carts, barrows, including 40 mobile canteens and 15 mobile fish and chip shops. Other vendors include fruit, vegetables, fish and hot sausages with rolls. One hundred and forty-four premises are registered for the storage of food by these vendors; some of these vendors share their premises with each other.

In order to encourage habits of cleanliness among outdoor food handlers, arrangements continue to operate whereby such vendors are granted permits for the free use of the washing facilities at public conveniences in the City. Each mobile snack bar, etc., is required to contain hand-washing facilities with hot water, soap, towel and nail brush. A photograph illustrates the provision has been made on tricycles operating in the City for the sale of hot sausages and rolls.

Registration requirements under the Manchester Corporation Act, 1950, relating to street traders, being analogous to, though not identical with, those concerned with food hawkers, are also administered by the Department. Many persons, mostly food vendors, have been so registered.

Milk and ice cream control.

The safety and purity of milk and ice cream distributed in Manchester secured by sampling these foods for bacteriological and biological examination and for chemical analysis. These sampling duties are undertaken in conjunction with the regular inspection of the dairies and other premises used, and supervision of the operation of the plant and equipment and the method of distribution.

Dairies.

More than 4,000 visits for inspection purposes were made during the year, particular attention being directed to the standards of hygiene maintained. Generally a high standard was observed and although a number of contraventions of the Milk and Dairies Regulations were found, in no instance was it necessary to proceed beyond warning the offenders.

The inspection and checking of the 13 pasteurising and 6 sterilising plants at the dairies licensed for these purposes have been carried out at least once monthly by the milk control inspectors in addition to their routine visits.

The efficiency of these plants is reflected in the high percentage (99.9 per cent.) of satisfactory results obtained on samples of the processed milk taken at the dairies and on the road whilst the milk was in course of delivery to hospitals, schools and the general consumer. 671 such samples were taken throughout the year with only 7 of them (1.0 per cent.) failing to pass the prescribed tests laid down in the regulations, viz., the phosphatase test for the efficiency of heat treatment, the half-hour methylene blue test for the quality of pasteurised milk and the turbidity test for the efficiency of treatment of sterilised milk.

City and "outside the City" milk producers.

16 samples of raw milk from City producers and 100 samples from "outside the City" producers coming into the City were examined by the bioassay test for tubercle bacilli. One of the City's producers' samples proved positive as also did 7 of the samples taken from "outside the City" producers, a total incidence rate of 6.9 per cent., as against 14.8 per cent. the previous year. The Ministry of Agriculture and Fisheries were notified of these positive results with a request that a veterinary inspection be carried out at the premises concerned. As a result, 3 cows suffering from tuberculosis of the udder were discovered and slaughtered under the Tuberculosis Order.

In addition to the above positive results, five local authorities, adjoining the City, notified the Department that 42 samples of the milk taken by their inspectors from farmers in their area, who were sending all their milk into Manchester dairies, had been found to contain tubercle bacilli. It was ascertained that the milk in question was being received and pasteurised before delivery to the consumer.

Whilst it is estimated that 99.5 per cent. of the raw milk arriving in the City is processed after arrival at the dairies, it was disturbing to find that the raw infected milk, two samples, which were being retailed to the consumer were of milk from Tuberculin Tested herds. The sale of raw Tuberculin Tested milk is permissible in a "specified area" and as from the 1st January 1954, Manchester will be included in such an area under the provisions of the Tuberculosis Order, made by the Minister of Food, and referred to later.

graded and 63 ungraded milk samples of the above producers' milk also submitted for bacteriological examination. 75.6 per cent. of the milk samples were satisfactory, whilst of the ungraded milk samples, per cent. were satisfactory.

Supply to hospitals, schools and day nurseries.

Pasteurised milk supplied to various hospitals, schools and day nurseries in the City has been strictly supervised and regularly sampled. The results of bacteriological examinations have shown that a high standard of quality and cleanliness has been maintained and on no occasion was the milk found to contain tubercle

The raw milk supplied to the Langho Epileptic Colony and Booth Hall, from the attested herds at the Langho Colony farms, has been sampled frequently. For a short period, difficulty was experienced with respect to the keeping quality of the milk. Investigations following the failure of the milk to comply with the statutory methylene blue test found this to be due to ineffective sterilising equipment. New equipment was ordered immediately and in the meantime use was made of hypochlorite solution. This gave satisfactory results and no further difficulties are anticipated. In no case has there been tuberculous infection.

In December, the Milk (Special Designations) (Specified Areas) (No. 3) Order, 1953, was made by the Minister of Food to come into operation on the 1st January, 1954. Accordingly, on and after that date, all dairymen who retail milk within the City and surrounding districts specified in the Order must retail the milk under a special designation irrespective of whether the premises from which the milk is retailed are inside or outside the area.

The special designations authorised by the Milk (Special Designation) Order, 1949 and 1950, are "Pasteurised," "Sterilised," "Tuberculin Free," and, until the 30th September, 1954, "Accredited."

The failure to comply with the provisions of the Order is liable to penalties under the Food and Drugs (Milk, Dairies and Artificial Cream) Act, 1950. Practically the whole of the City's milk supply has been either pasteurised or sterilised, for some considerable time, the application of the Order will not make any great difference so far as Manchester is concerned.

Complaints received from the public regarding unsatisfactory milk supply have increased in number and these were investigated and appropriate action taken.

No outbreak of infectious disease implicating the City's milk supply has occurred during the year.

The number of premises registered for the manufacture and/or sale of ice cream has now reached the high figure of 1,783 as against 1,732 on the 31st December last year and 881 in 1947. Premises registered during the past two years have been mainly equipped with totally enclosed, automatic, refrigerators and sell ice cream in sealed packets only; the open "old-fashioned" ice tub, once so often seen in shops, is now a thing of the past.

The most unsatisfactory feature of the distribution of unwrapped ice cream is the sale from carts and barrows in the streets, as risk of contamination of the ice cream is most likely to occur in this manner. It is gratifying to note, however, that the majority of street vendors have co-operated with the department by totally enclosing their vehicles so as to reduce the risk of contamination of the ice cream and dirt from the street.

Regular visits of inspection have been made to ice cream premises, a general standard of cleanliness has been good. In no instance was it necessary to institute legal proceedings in respect of dirty premises or equipment.

105 samples of ice cream were taken during the year for bacteriological examination. 87 (82.9 per cent.) were placed in Grades 1 and 2 and were therefore, satisfactory. 8 (7.6 per cent.) came into Grade 3 which is satisfactory, whilst 10 (9.5 per cent.) fell into the lowest grade (Grade 4). Thorough investigation was made at the factories from which the Grade 3 and 4 samples came and further samples attained Grade 1 standard in every case.

It is of interest to compare the results of bacteriological examinations during 1953 with those received during 1948 which was the first complete year of the operation of the Ice Cream (Heat Treatment) Regulations 1948 when 108 samples were examined, only 46 (42.6 per cent.) were in Grades 1 and 2, 19 (17.6 per cent.) in Grade 3 and 43 (39.8 per cent.) in Grade 4.

It is satisfactory to note that there have been no cases of infection reported to the department during the year which could be traced to ice cream consumption, nor has any complaint regarding ice cream been received.

Iced lollies.

The manufacture of iced lollies was investigated with particular reference to metallic contamination. Samples of lolly-ices from dealers and of concentrates from firms manufacturing such compounds in Manchester were examined by the public analyst who found that although in some samples lead or copper was detectable, the amounts did not exceed safety limits so as to constitute a health risk, especially where, in respect of the use of syrups, manufacturers' instructions as to dilution were observed by the dealers.

It is felt, however, that the presence of metals could become significant and it is requisite that proper care should be exercised in each of the different stages from the manufacture and compounding of syrups to the freezing solutions.

Milk (Special Designation) Regulations, 1949 and 1950.

LICENCES ISSUED DURING THE YEAR.

Dealer's licence to use the designation:

"Pasteurised"—

- (A) Pasteurising establishments
- (B) Other dairies and bottled milk shops.. .. .

"Sterilised"—

- (A) Sterilising establishments
- (B) Other dairies and bottled milk shops.. .. .

"Tuberculin tested"—

- Dairies and bottled milk shops

Supplementary licences to use the designation:

- Pasteurised
- Sterilised
- Tuberculin tested

Place of collection of sample	No. of samples examined		Satisfactory		Unsatisfactory		Positive		Negative	
	No.	Percentage	No.	Percentage	No.	Percentage	No.	Percentage	No.	Percentage
Pasteurising plant at dairy	91	97.8	89	2.2	—	—	2	—	2	100.0
Hospitals	123	99.2	122	0.8	—	—	24	—	24	100.0
Schools and day nurseries	133	98.5	131	1.5	—	—	25	—	25	100.0
On road during distribution	324	99.4	322	0.6	—	—	6	—	6	100.0
Totals	671	99.0	664	1.0	—	—	57	—	57	100.0

(B) RAW UNTREATED MILKS.

Place of collection of sample	BACTERIOLOGICAL EXAMINATION										BIOLOGICAL EXAMINATION FOR TUBERCLE FACILLI							
	GRADED MILK (TUBERCULIN TESTED AND ACCREDITED (sold as such))										UNGRADED MILK*							
	OFFICIAL TEST (sample to pass a methylene blue test)										Satisfactory				Unsatisfactory			
	No. of samples examined	Satisfactory		Unsatisfactory		No. of samples examined	Satisfactory		Unsatisfactory		No. of samples examined	Positive		Negative				
No.		Percentage	No.	Percentage	No.		Percentage	No.	Percentage	No.		Percentage	No.	Percentage				
City farms	4	100.0	—	—	12	9	75.0	3	25.0	16	1	6.2	15	93.8				
Corporation farms	8	50.0	4	50.0	—	—	—	—	7	—	—	—	7	100.0				
Hospitals (supplied by Corporation farms)	8	75.0	2	25.0	—	—	—	—	8	—	—	—	8	100.0				
On road during distribution	2	100.0	—	—	—	—	—	—	2	—	—	—	2	100.0				
Individual country farms (on arrival at City dairies)	37	73.0	10	27.0	51	39	76.5	12	23.5	100	7	7.0	93	93.0				
Totals	59	72.9	16	27.1	63	48	76.2	15	23.8	133	8	6.0	125	94.0				

* There is no legal bacteriological standard for raw ungraded milk. For comparison purposes, however, the same test as that applicable to graded milks has been adopted.

Food and drugs adulteration.

The administration of legislation dealing with the protection of the consumer against adulteration, misrepresentation, or other irregularities in the sale of food or drugs has been fully maintained. Three experienced sanitary inspectors devote the whole of their duties to sampling and the extensive enquiries are frequently involved in subsequent procedure. In the selection of samples every regard is had to ensuring that the sampling is done to the best advantage with due attention to the range of food and drugs customarily purchased by a family. Necessarily, this includes a proportion of proprietary brands, pre-packed foods and medicines, and, whilst it is true that reputable manufacturers often maintain laboratory control of their products, the food and drugs authority could not properly rely on any trade control to protect the consumer against inadvertent or other deviations from legal requirements.

The period under review was the first year following the abandonment in 1952, of the Ministry of Food's advisory service to manufacturers regarding labels intended for use in the description of foods. This service was particularly useful both to traders and to food and drugs authorities in securing an adequate uniformity in essentials concerned with correct labelling, but the Department's experience to date has not shown any marked increase in labelling infringements. Contraventions of the Labelling of Food Order, 1953, occurred in the following pre-packed foods: cereal soup mixture, mustard, Christmas pudding, mint jelly and table jelly concerning which warnings to the manufacturers secured the proper labelling. In addition, the Department was in communication, at the close of the year, with the manufacturer of a sandwich-spread on the necessity for revision of the label in use for the food.

A further legislative change bearing on the responsibilities of food and drugs authorities became operative on the 1st March, 1953, when the Order of Maximum Prices Meat Products Order No. 3, 1952, dealing with beef and pork sausages, was revoked. The Order, in prescribing the meat content of such sausages, provided a legal standard for those commodities irrespective of the main purpose of price limitation. This was of value not only in assuring the purchaser that a beef or pork sausage would satisfy that standard but also in securing a most desirable uniformity in the administration of the Food and Drugs Act for that purpose by obviating the risk of the adoption of different standards by different authorities. In addition, it was of some significance in avoiding unfair competition between manufacturers when the price of the ingredients were in short supply. Since the revocation of the Order, however, Manchester's experience has been that the meat content is related to price.

The number of samples of food and drugs totalled 3,303, of which 2,877 were milk samples, including 17 "Appeal to Cow" samples. In addition, 287 informal samples of milk, 9 samples of ice cream and 45 samples of "lollies" were submitted by the milk control inspectors.

Of the 393 milk samples purchased from retailers, only one was found to fall below the presumptive legal standard, namely 3 per cent. of fat and 8.5 per cent. of protein, not fat, prescribed in the Sale of Milk Regulations, 1939. A further sample taken in this case was found to be satisfactory.

8 samples of milk were taken from consignments from farms on arrival in the City and 188 of these samples proved, on analysis, to be below prescribed standard. 73 of these samples were deficient in fat but as the fat content of the respective consignments was over 3 per cent. no action was required; in addition, 18 samples, which were slightly below the prescribed standard, when repeated, were found to be satisfactory. Warning letters were sent to farmers in respect of 62 of the samples and follow-up visits were genuine.

Legal proceedings were instituted against 6 farmers in respect of 35 samples which showed substantial adulteration, and fines and costs amounting to £12s. 7d. were imposed.

Public Health (Preservative in Food) Regulations, 1925—1953.

The Regulations permit certain foods to contain specified preservatives not exceeding prescribed amounts and subject to certain conditions including the display of a notice, or the exhibition of a notice, at the place of sale, to the effect that the commodity contains preservative.

A warning letter was sent to one retailer for failing to display the necessary notice dealing with the presence of preservative in sausage. It was evident that the particular omission had been inadvertent and of a temporary nature, and on subsequent visits, the Regulations were being fulfilled.

Legal proceedings were taken against a manufacturer of meat products for the addition of sulphur dioxide to brawn and polony, and a fine of £10 was imposed at the City Magistrates Court for each offence.

Public Health Condensed Milk Regulations, 1923—1953.

Public Health Dried Milk Regulations, 1923—1948.

Samples of condensed and dried milks were submitted to the Public Health Department for examination, and the quality and labelling were found to be in accordance with the regulations.

Butter and margarine factories—wholesale premises.

The number of registered premises is 97, and inspections made of each premises found that the requirements of the Department were satisfied in respect of either the absence of adulterants or the structural arrangements of the premises where both butter and margarine are stored.

Food Standards (Ice Cream) Order 1953.

From the 1st June, 1953, the minimum standards of composition of ice cream were restored to those originally prescribed in January, 1951, viz., not less than 5 per cent. fat, 10 per cent. sugar and 7½ per cent. milk solids (including fat), whilst permitting an alternative standard for ice cream containing fruit pulp or fruit puree and/or "Parev" (kosher) ice.

The 33 samples of ice cream submitted for analysis were found to comply with the prescribed standards.

The Food Standards (Curry Powder) Order, 1949 requires that powder shall contain lead in excess of 10 parts of lead per million parts powder. One informal sample, found on analysis to contain 15 parts of lead per million, was repeated formally and was found to be satisfactory. On another occasion an informal sample was found to contain 25 parts per million and, when repeated formally, was found to contain 22 parts per million. The existing stock was withdrawn from sale and a warning letter was sent to the retailer who had been unable to produce any invoice for the commodity. Careful, subsequent analysis failed to disclose any of the particular brand of curry powder being distributed for sale and it is understood to have been completely withdrawn.

A contravention of the Pharmacy and Medicines Act occurred in the case of a sample of medicated lozenges as no formula was given on the label or in the instructions. The manufacturer promptly corrected this omission and subsequent analysis found that observance of the correct labelling continued.

Minor deficiencies were found in samples of lemon curd, shredded suet and glucose with vitamin D and calcium phosphate, but repeat analysis were found to be satisfactory. In the case of a sample of marmalade found to be deficient in soluble solids to the extent of 3.5 per cent., a cautionary letter was sent to the manufacturer. An informal sample of cheese spread was found to be 27 per cent. deficient in fat compared with the declared fat content, but sampling officers have been unable to obtain a formal sample, and the commodity appears to have been withdrawn from distribution.

Extraneous matter was found in a number of samples of food, generally from private samples submitted by members of the public. In some instances the matter involved commodities manufactured or packed in the areas of other authorities, and, following reports from those authorities and investigation of the particular circumstances where appropriate, warning letters were issued to the authorities concerned. In no instance has the Department become aware of a recurrence of the occurrences.

Adulterated and other unsatisfactory samples and action taken.

Informal samples						Formal samples												
Adulterated or unsatisfactory	Cautioned	Further samples taken or being sought	Irregularity deemed too slight for further action	Referred to Weights and Measures Department	Referred to local authority concerned	Dealt with under Food Clauses	Irregularity deemed to be accidental	Article	Adulterated or unsatisfactory	Cautioned	Legal proceedings ordered	Referred to M.O.H. of local authority concerned	Further sample taken	Withdrawn from stock	Summoned	Fined	Amount of fines	Amount of costs
45	*	1	1	1	1	1	1	Milk	143	106†	35	—	2	—	35	35	£ 109	£ 19
1	1	1	1	1	1	1	1	Bottled mint jelly									s. 0	d. 7
2	2	1	1	1	1	1	1	Bread									10	0
2	1	1	1	1	1	1	1	Cake mixtures										
1	1	1	1	1	1	1	1	Canned cream										
1	1	1	1	1	1	1	1	Cheese										
1	1	1	1	1	1	1	1	Christmas pudding										
2	2	1	1	1	1	1	1	Dried cereal soup mixture	1									
1	1	1	1	1	1	1	1	Dried pulses										
1	1	1	1	1	1	1	1	Dried soup										
1	1	1	1	1	1	1	1	Energy food										
1	1	1	1	1	1	1	1	Jelly crystals										
1	1	1	1	1	1	1	1	Meat products	4	2	2	1		2	2	20	0	
1	1	1	1	1	1	1	1	Pickles	1									
1	1	1	1	1	1	1	1	Potato crisps										
1	1	1	1	1	1	1	1	Preserves	2	1								
1	1	1	1	1	1	1	1	Sauce										
2	2	1	1	1	1	1	1	Spices	1	1								
3	2	1	1	1	2	1	1	Suet shredded	1									
1	1	1	1	1	1	1	1	Sugar confectionery										
1	1	1	1	1	1	1	1	Glucose and vitamin D										
1	1	1	1	1	1	1	1	Medicated lozenges										

* Followed by formal samples where necessary.

Cautioned or samples repeated.

REPORT FROM MARKETS DEPARTMENT ON SUPERVIS OF MEAT AND OTHER FOODS.

The Medical Officer of Health is indebted to the General Manager Markets Department for the following particulars relating to the operations of the Department during the year ended 31st March, 1953.

The numbers of animals slaughtered at the City Abattoir during certain years are shown in Table A; Table B shows the total condemnations at the City; and Table C the total weight of meat condemned at the City and Wholesale Meat Market.

The bulk of the meat, fish and fruit which is condemned is found unfit for food on arrival at the markets, railway stations, and wholesale markets. An efficient system of inspection at the centre of distribution lessens the amount of diseased meat, etc., being exposed for sale in retail shops.

The staff of inspectors comprises 1 chief veterinary inspector, 3 veterinary inspectors and 10 meat, fish, etc., inspectors.

TABLE A.
Animals slaughtered at the City Abattoir during certain years.

Year ended 31st March	Cattle	Sheep and lambs	Calves	Pigs
1944	39,951	171,076	29,181	1,512
1945	42,927	172,276	18,305	1,477
1946	61,387	168,152	34,881	1,705
1947	64,061	233,675	46,701	1,385
1948	75,051	179,350	34,246	752
1949	58,645	208,725	39,447	2,659
1950	72,449	209,048	44,170	3,058
1951	80,852	216,399	52,259	6,403
1952	97,467	194,143	44,755	7,718
1953	68,400	232,182	31,720	17,466

TABLE B.

Total condemnation of various foodstuffs during 1944-53.

of food	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953
ns)	542	697	774½	821	852½	808	978	954½	1,113½	775
ns)	112½	183	168½	190	387½	284	316½	160	79½	57½
ns)	15½	28½	10½	26½	144½	80	136	83½	91½	81
es (tons) . .	100	366½	206	127	326½	131½	162½	109½	61	23
umber) . .	1,200	120	718	384	946	40	640	1,614	900	2198
ead) . .	165	728	1,079	223	156	524	1,835	675	184	658
(head) . .	5,756	8,429	3,855	5,129	2,812	6,465	15,043	7,419	5,048	4,130
(head) . .	5,116	6,704	1,079	3,363	2,217	1,731	11,040	12,610	17,372	9,587

TABLE C.

Meat condemned at the City Abattoir and Wholesale Meat Market.

Particulars	Year ended	
	31st March, 1952	31st March, 1953
Weight of meat condemned at the City Abattoir and Wholesale Meat Market	Tons 1063½	Tons 746½
Which the weight of dressed meat consigned from places other than the city was	12¾	14¾
and in which were imported offals amounting to . .	71 lbs.	364 lbs.

Unwholesome food condemned

Kind of food	Year ended	
	31st March, 1952	31st 1951
MEAT :—	lbs.	
Beef	2,303,217	1,59
Mutton	13,618	2
Veal	32,142	2
Horseflesh	68	
Pork	139,398	8
Reindeer	168	
Whalemeat	277	
Venison	73	
Imported offal	71	
Goatflesh.. .. .	5,147	
	2,494,179 = 1,113½ tons	1,73 = 7
FISH :—	lbs.	lb.
Fish	168,247	12
Shellfish	9,444	
	177,691 = 79½ tons	12 = 57
GAME	head 184	
POULTRY	5,048	
RABBITS	17,372	
FRUIT	lbs. 205,235 = 91½ tons	18 = 8
VEGETABLES	136,573 = 61 tons	5 = 2
MISCELLANEOUS :—	No.	N
Eggs	900	
Evaporated, condensed and other canned milks..	lbs. 8,387	lb. 6
Sundry provisions	128,207	90

ightly over 1,000 tons of unwholesome food were condemned under all
ings by the inspectors of the Markets Department during the year ended
March, 1953. With the exception of $40\frac{1}{4}$ tons, this total comprised the
gate condemnations arising from routine duty examinations.

ne $40\frac{1}{4}$ tons condemned arose out of 346 special inspections involving
ons of foodstuffs, classified as follows:—

	Tons
ound to be fit for retail trade	76 $\frac{3}{4}$
ound usable for manufacturing for human food	3 $\frac{1}{2}$
ound usable for animal feeding stuffs	22
ound usable for commercial or industrial purposes	7
ondemned as unfit for any purpose	40 $\frac{1}{4}$
	149 $\frac{1}{2}$

ndemned food is handed over to the Cleansing Department of the
ration for processing for commercial or industrial purposes, or for
ction by fire. A small portion of the total condemned as unfit for human
mption is found usable for animal feeding stuffs and for commercial and
rial purposes.

ith the exception of the following, which were seized while deposited or
d for sale, the quantities given in the preceding tables were surrendered
eing condemned by inspectors of the Department:—

Kind of food	Year ended	
	31st March, 1952	31st March, 1953
try	Head —	Head 1
try provisions	lbs. 2	lbs. 1 $\frac{1}{2}$

E.—The term “surrendered” includes cases in which inspectors have discovered
some food in the course of their duty, but in which, owing to the salesman’s acceptance
spector’s decision, it has been deemed unnecessary to obtain a magistrate’s order prior
uction.

Carcases inspected and condemned—year ended December, 1953.

	Cattle excluding cows	Cows	Calves	Sheep and lambs	Pigs	Goats
Number killed and inspected—						
At the City Abattoir	34,274	29,380	28,899	222,811	26,859	211
Brought into the City after killing and inspected	10,195		1,176	6,053	53,163	—
All diseases except tuberculosis—						
Whole carcases condemned:—						
At the City Abattoir	24		373	268	210	8
Brought into the City after killing	—		2	—	10	—
Carcases of which some part or organ was condemned:—						
At the City Abattoir	5,879		67	867	3,883	15
Brought into the City after killing	226*		—	7*	49*	—
Percentage of the number inspected affected with disease other than tuberculosis:—						
At the City Abattoir	9.3		1.5	.5	15.2	10.9
Brought into the City after killing	2.2*		.2	.1*	.1*	—
Tuberculosis only—						
Whole carcases condemned:—						
At the City Abattoir	46	632	92	—	51	—
Brought into the City after killing	—		—	—	—	—
Carcases of which some part or organ was condemned:—						
At the City Abattoir	1,558	6,957	15	—	1,633	—
Brought into the City after killing	12		—	—	3	—
Percentage of the number inspected affected with tuberculosis:—						
At the City Abattoir	4.7	25.8	0.4	—	6.3	—
Brought into the City after killing . . . . .	.1		—	—	Negligible	—



SMOKE ABATEMENT.

The public conscience was awakened on this aspect of environmental pollution following the high death rate in the London area during the period up to the end of 1952, and, in July, 1953, the Government appointed a committee to enquire into the nature, causes and effects of air pollution and the efficacy of present preventive measures; to consider what further preventive measures are practicable; and to make recommendations.

This Committee, under the chairmanship of Sir Hugh Beaver, published its interim report in December, 1953. In the Report the word "smog" is used for the first time in an official paper. It recognises that complete elimination of both solid and gaseous pollution, if ever attainable, will take many years but it is within practicable reach to avoid the worst evils of smoke and pollution. It is simply a question of balancing the cost and inconvenience of forcing a more efficient and scientific use of our fuels against all the advantages to be obtained in health, convenience and economy from a clear atmosphere. This problem is one that must be faced.

The success of the operation of the City's first smokeless zone, and the publicity aroused by the London fog disaster caused a great increase in the number of local comments and enquiries on smoke abatement measures. In addition, there were many enquiries from other areas seeking information on the methods in Manchester for reducing smoke pollution. It was fortunate that this was the first period for some years in which the smoke inspectorate was at least up to pre-war strength, although the actual duties and problems of the present difficult period have greatly increased since pre-war days. The staff could not be placed on normal industrial smoke abatement as a great deal of premises had to be undertaken with a view to the establishment of a final extension to the existing smokeless zone; this aspect is referred to in this report. Special attention had also to be paid to the operation of the existing smokeless central area.

In previous years, the principal cause of industrial smoke nuisances was found to be due to unskilled firing. Despite the intensive publicity and propaganda on the need for fuel efficiency, and the special course for stokers at the Manchester College of Technology, only a very small proportion of men actually engaged in firing furnaces have received any technical training. It would appear that in the present condition of the labour market the more skilled men prefer to find less arduous employment in other occupations. It has been observed that, in some instances, employers are reluctant to employ carelessly fired firemen for fear that they may take offence and seek other employment. In most cases, however, even the most unskilled man is able to obtain some knowledge of the actual combustion processes taking place in a furnace provided that this can be explained whilst he is at work; but he is diffident about attending classes and, where various shifts are concerned, it is practically impossible for a stoker to make regular attendances.

It is remarkable that in those instances where automatic smoke alarms have been installed, no cases of smoke nuisances have been reported. It seems probable to surmise that the psychological effect of an audible alarm increases the smoke consciousness of the staff and, if inadvertently dense smoke should be emitted, the firemen are immediately warned of some fault in furnace operations. As a smoke nuisance is unlikely to be caused deliberately, a stoker can not only take steps to end the dense smoke emission but, also, he is enabled to detect the actual prior causes of the nuisance by the immediate operation of the smoke alarm.

Economic and other circumstances preclude the use of coke in lieu of coal in most industrial plants, but conditions may arise in which the only solution is the substitution, partly or wholly, of coke in place of coal. Although judged on calorific value, coke is dearer than coal, in actual practice where coke is inefficiently utilised coke may be substituted without increased cost. An example, in small scale plant where the fireman has other duties to perform, is necessary to leave the furnace for long intervals during which for long periods there is a high excess of air reducing combustion efficiency. When coal is used there is a steady rate of combustion, excess air is reduced to the minimum, no smoke is evolved, and the efficiency of the plant is increased. In one instance the use of coke fuel was the only economic solution to a dense smoke emission from a coal fired water-tube boiler plant. These boilers were of an old type with the settings at a low level, thus allowing of flame impingement on relatively cool water tubes, with consequent smoke emission. When the plant was being worked at low loads the emissions were not necessarily serious, but if there was any attempt to work the boiler at the maker's rating, a large amount of smoke was evolved. These facts were pointed out to the management, but the use of coke fuel suggested by the smoke inspector, but his advice was ignored and various advisers and consultants called in and special draughting equipment installed; all without success. As a last resort, coke fuel was tried after obtaining special deliveries of a quality suitable for the particular conditions. The result has been highly successful, all steam demands have been met at no higher cost than when using coal. It is recognised, however, that similar results would not necessarily apply to other plants.

In spite of the many adverse remarks about the quality of post-war coal, it is comparatively rare for the quality of the fuel to be the sole cause of smoke emission. In those instances where fuel has been the cause, it was mainly due to the wrong grade of fuel having been supplied to mechanical stokers in a heavily loaded plant.

Along with increased mechanisation at the collieries there is necessarily an increased " fines " content in the fuel, which in turn is conducive under certain conditions to grit emissions from the chimneys and special attention is paid to this factor. In one case it was necessary to take legal action to abate a grit nuisance due to misuse of a coke-fired boiler in a residential area.

The policy of the Department is to co-operate with industrialists and to endeavour to understand the special difficulties which may arise. For educational and other purposes, 2,528 visits were made by the smoke inspectors and it is pleasing to note that these visits are welcomed both by the management and boiler plant operatives.

The greater interest in smoke abatement which has been aroused by the success of the central smokeless zone has led to a greatly increased number of complaints from the general public—278 complaints compared with 93 in 1954. Many of these refer merely to smoke emission which cannot be dealt with under the Public Health Act unless a nuisance is being caused. In other instances the nuisances have been caused by overloaded plant and the only solution would be to reduce production until new plant could be installed. In such circumstances special precautions are advised to minimise any nuisance until new plant can be installed.

The following statement relates to the work of the smoke inspectors under provisions of the Public Health Act, 1936 :—

Time observations taken	518
Black smoke, two minutes and over in half-hour periods	49
Smoke other than black and causing nuisance	8
Black smoke under two minutes	211
Smoke other than black not in such a quantity as to be a nuisance	6
Total amount of black smoke observed in minutes	448
Average amount of black smoke observed (in minutes) per observation revealing black smoke	1.72
Complaints from all sources	278
Visits to works <i>re</i> smoke abatement	2,528
Premises where inspectors recommended plant to be altered, improved or repaired	85
Premises where plant was found to have been altered, etc, as a result of inspector's recommendation	63
Cases reported to Committee	57
Cases cautioned or excused	19
Statutory notices served—black smoke.. .. .	23
Statutory notices served—other than black	7
Prosecutions for smoke nuisances and penalties imposed	4
Amount of penalties and costs	£14 15 0
Statutory notices expiring without further action	14
Approximate number of industrial chimneys	1,444
<i>Cases reported to Committee—causes of emissions:—</i>	
Bad firing	40
Unsuitable fuel	5
Bad firing and unsuitable fuel	1
Defects in plant	11

Smokeless area.

Manchester Corporation Act, 1946, Section 35.

The central smokeless area was inaugurated on 1st May, 1952, and, by the end of 1953, valuable experience had been gained of the operation of the smokeless zone. No deliberate infringements of the Section have been reported, and such smoke emissions as have occurred have been due to inadvertence in the automatic control of fuel burning plant, or to an unsuitable type of fuel being delivered. It is recognised that, under favourable conditions, the automatic control system of firing operates at a high efficiency with minimum smoke emission, but mechanical failure, unsuitable fuel or unskilled control may result in emissions of varying densities of smoke emission. In addition, certain features of the automatic control may necessarily lead to periodic smoke emission. In such cases the occupiers are urged to install some method of smoke alarm, so that a warning of any smoke emission is given to the operator of the plant. During the year, the occupier of a large commercial building discontinued the use of a thermostatically controlled coal-fired underfeed stoker because of the unreliable fuel supplies and inefficient operation of the thermostatic control. The coal-fired stoker was replaced by a coke stoker although it is expected that during a complete heating season, the fuel costs and mechanical maintenance will be higher than with coal.

In general, the welcome co-operation of the public has been most marked and occupiers who may have gone to the expense of converting their appliances to smokeless operation have no hesitation in reporting anything they consider as "smoke" from any premises in the vicinity. Such incidents occupy a large amount of staff time both because of the sporadic nature of such an emission and the tracing of its source, particularly when the chimney or stack cannot be seen from the street or any adjoining building. In some instances the "smoke" has been due to the volatile content of the smokeless fuel, or to water vapour produced during combustion or evaporated from the moisture content of solid fuel.

Although there have not been scientific measurements of pollution in the zone, cleaner conditions have been noticeable. Suspended matter is necessarily carried by the wind into the area, but there has been an absence of the heavier matter, such as the larger particles of soot, which normally settle near the source of emission. In some instances there has been greater visibility in the smokeless zone than in the adjoining areas. This may be due to the evolution of warm air and the smokeless products of combustion from the area, which act on the moisture laden air in a similar manner to FID airfields during the war.

The success of the initial smokeless zone experiment has been so marked that, on the instructions of the Health Committee, a further survey of 130 streets was carried out with a view to forming a marginal extension of "the smokeless area" to be bounded by Oxford Street (from Portland Street), the viaduct of the Manchester, South Junction and Altrincham Railway, London Street, Ducie Street, Dale Street, Church Street, Cannon Street, Bank Buildings, Macdonald's Lane, Lower Cannon Street, Cannon Street, Cateaton Street, Victoria Bridge, River Irwell, Albert Bridge, Bridge Street West, Bridge Street, Deansgate, St. Mary's Gate, Market Street, Piccadilly, Portland Street.

The survey had revealed that within the 516 separate premises in the zone there are 6,694 appliances in use for heating, cooking, hot water or hot water supply; 355 of the appliances being in premises used as dwellings. Of the 6,694 appliances in use, 5,115 are operated smokelessly, being gas, oil or electric appliances, 431 use solid smokeless fuel but are not smokeless during lighting up and the remaining 1,148 appliances, using coal, are not smokeless.

(i) Number of appliances in use	990
(ii) Number operated smokelessly	355
(iii) Number not operated smokelessly:—	
Open grates	990
Heating—	
Hot water or steam supply boilers	43
Heating stoves	28
Kitchen ranges	87
	— 1,148
(iv) Number operated smokelessly except during lighting up:—	
Open grates	12
Heating—	
Hot water or steam supply boilers	313
Heating stoves	104
Kitchen ranges	2
	—

us, if the prohibition of smoke is extended to this area, 1,579 appliances
be affected and the following information is supplied about these
nces:—

Open grates (1,002):

All the grates are capable of burning semi-coke such as "Coalite" and the use of gas
pokers would overcome the emission of smoke during lighting of the fires. Alternatively,
the occupiers may prefer to install gas or electric heating appliances.

Boilers for heating, hot water or steam supply (356):

313 of these boilers are using coke as fuel and are operated smokelessly except during
lighting up. The provision of a gas lighting torch would secure the necessary smokeless
operation during the ignition of the coke. The remaining 43 boilers are using coal with
mechanical stoking to 41 boilers and hand-firing to 2. Occasional emissions of smoke
of varying densities occur from these appliances and in order to secure smokeless operation
reconstruction or conversion of the plant may become necessary.

Heating stoves (132):

104 of these stoves are using coke as fuel and are operated smokelessly except during
lighting up; the remaining 28 are burning coal but are capable of burning coke. The
substitution of coke for coal in these 28 stoves and the use of gas pokers for ignition with
the stoves could secure smokeless operation.

Kitchen ranges (89):

2 of the ranges are using coke as fuel and in 83 other ranges solid smokeless fuel
could be used but in each case gas ignition would be necessary to secure smokeless
operation. In the remaining 4 ranges, bituminous coal is being used and replacement by
smokeless fuel appliances would be necessary.

It is estimated that, in the area, the average weekly consumption of bitu-
coal is 310 tons, anthracite 3 tons, coke 340 tons and oil 22 tons.

The Department is informed that sufficient supplies of solid smokeless fuel
are available to meet the requirements of occupiers of premises within
the area, and representatives of the North Western Electricity Board and
the Western Gas Board have indicated that the increased demand for
electricity and gas, or for the supply and fitting of the necessary appliances,
can be satisfied.

It has been considered practicable that this area could be declared a smokeless
area to be operative from the 1st October, 1954; an Order was submitted to
the Minister of Housing and Local Government for confirmation and this is

prohibition of smoke from newly installed furnaces.

Manchester Corporation Acts, 1946 and 1950.

The provisions of the above Acts enable the Corporation to control the
erection of new furnaces so as to ensure, subject to certain exceptions,
that new fuel burning installations shall be smokeless as far as is practicable.
The Corporation was the first local authority in the country to obtain these powers
under the Acts of 1946, the Corporation has required that all newly installed furnaces
within the purview of this legislation shall be mechanically fired if
solid fuel is intended to be used.

So long as a new installation is smokeless as far as is practicable, it is compulsory for an industrialist to seek formal approval from the Corporation, and, in actual practice, only a minority do so. The Department, however, becomes aware of new installations from informal enquiries from its consultants and from visits of smoke inspectors to the various works. In addition, such information is obtained from the scrutiny of plans which have been submitted for approval to the Corporation in respect of building and town planning provisions. These plans are forwarded by the Chief Architect to the Sanitary Services Division of the Department where coal burning installations are shown. In these latter cases the industrialist and their consultants are interviewed, and the requirements of the Corporation are explained to them. In all such cases where coal burning furnaces were intended to be used, the occupiers of the premises agreed to install mechanical means of firing. During the year six formal certificates of approval were issued in relation to small scale plant, three of which were gas fired, two coke fired and one mechanically fired with coal.

Recording of atmospheric pollution.

Prior to 1912, observations for the measurement of atmospheric pollution were made independently by local authorities, but in that year a conference was called so that some standardisation and methods should be evolved so as to allow that information by different observers should be reasonably comparable. The result of this conference was the appointment of a Committee for the Investigation of Atmospheric Pollution. In 1913 financial arrangements were reorganized, part of the cost being borne by those who were interested in the subject of atmospheric pollution, and the remainder of the cost being found from a grant of the Department of Scientific and Industrial Research. The Committee was reconstituted in 1945 as a Committee of the Fuel Research Board, and is empowered to consider the prevention of atmospheric pollution as well as its measurement. Standardisation of instruments led to improvements in the design of instruments and methods. In turn, brought about research into the types, movements and effects of atmospheric pollutants.

The Atmospheric Pollution Research Committee divides atmospheric pollution into gases, large particles which are deposited fairly quickly, and their place of origin, and small particles including smoke which is suspended in the air for a long time. The nature of the impurity is determined partly by the particular industries in the neighbourhood, but pollution from the combustion of coal is to be found in most parts of the country. It is estimated by the Department of Scientific and Industrial Research that in Great Britain there are emitted annually, 2.3 million tons of smoke, 0.5 million tons of ash, and 5.0 million tons of sulphur dioxide. About half the sulphur dioxide produced in domestic grates, although these use less than a quarter of the coal. About four-fifths of the ash and sulphur dioxide come from industrial undertakings.

The principal instruments used for the measurement of pollution are the Deposit Gauge, the Lead-Peroxide Instrument, the Smoke Filter, the Volumetric Sulphur-dioxide Apparatus. Another instrument, recently developed by the British Cotton Industry Research Association, measures pollution by the "murks" and by courtesy of the Director is described later in this report.

The Deposit Gauge is somewhat similar to a rain gauge and is a general purpose instrument for measuring the heavier particles of pollution which fall into the air.

The Lead-Peroxide Instrument provides an index of the activity of sulphur dioxide in the atmosphere so that some estimate may be obtained of the effect of a polluted atmosphere on building materials. Lead peroxide is used because it reacts with sulphur dioxide in a predictable and uniform manner. As with a deposit gauge, changes in meteorological conditions can affect the monthly average of the instrument.

The Smoke Filter measures the finer particles or the suspended matter which may remain suspended in the air for a longer time. The matter collected is usually referred to as "smoke." The apparatus consists of a pump, electrically operated, which draws about 50 cubic feet of air through a filter paper each day. At the end of the test the discoloured filter paper is compared with a standard set of shades from which the average concentration of smoke is estimated.

The Volumetric Sulphur-Dioxide Apparatus consists of a bubbler containing a 10% solution of hydrogen peroxide through which about 50 cubic feet of air is passed each day. The sulphur dioxide is removed from the air to form sulphuric acid, by the reaction $H_2O_2 + SO_2 = H_2SO_4$. The volumetric sulphur dioxide apparatus is usually used in conjunction with the smoke filter described above. Because sulphur dioxide is necessarily evolved during the combustion of coal, the amount collected by the volumetric sulphur dioxide apparatus will give some indication of the amount of coal consumed in the vicinity.

The Corporation maintain seven deposit gauges within the City and one at Bowle House, Handforth, which is used for the purpose of comparison. Because of the variable factors such as meteorological conditions may affect the results, it is considered advisable to use the average results for five years in comparative studies. In the table which follows it will be noted that there has been a reduction in the amount of deposited atmospheric pollution at all the gauges with the exception of that at Booth Hall. The increase at Booth Hall is due to a slight increase in insoluble matter. The sulphur pollution as measured by the lead-peroxide method also shows reductions compared with the average of the previous five years. This may be due to reduced coal consumption in the area.

Deposited atmospheric pollution.

(Tons per square mile.)

Monthly averages together with the averages for the previous five years.

	Rainfall (inches)		Insoluble matter		Soluble matter		Total solids	
	1953	Five yearly average	1953	Five yearly average	1953	Five yearly average	1953	Five yearly average
.. ..	2.2	2.6	4.70	5.91	6.47	5.91	11.17	11.82
.. ..	2.6	2.9	8.72	8.31	6.46	6.43	15.18	14.74
.. ..	2.7	3.0	6.52	10.45	5.44	6.93	11.96	17.38
.. ..	2.4	2.8	11.09	13.86	7.53	8.30	18.62	22.16
.. ..	2.6	3.0	16.70	34.24	10.26	11.92	26.96	46.16
.. ..	2.4	2.9	12.15	12.89	7.40	7.81	19.55	20.70
.. ..	2.2	2.7	10.57	10.24	5.28	6.07	15.85	16.31
.. ..	2.4	2.9	10.06	13.69	6.98	7.63	17.04	21.32

Station at Knowle House, Handforth.

Station	Rainfall (inches)		Insoluble matter		Soluble matter		Total s
	1953	Five yearly average	1953	Five yearly average	1953	Five yearly average	1953
Knowle House	2.3	2.7	3.21	3.78	4.19	5.00	7.40

Sulphur pollution.

(Measurements by the lead peroxide method)

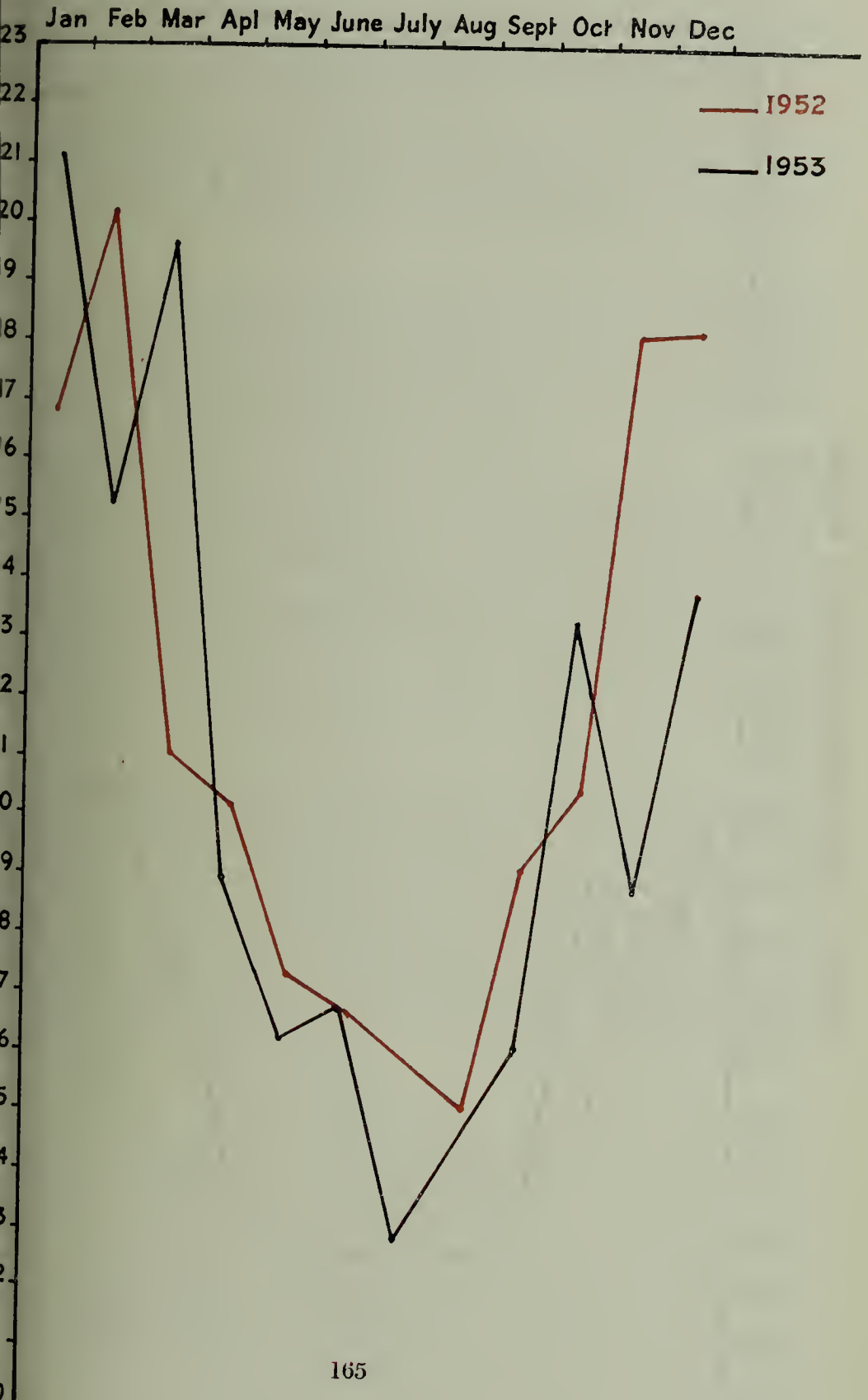
Weight in milligrammes SO₂ per 100 square centimetres exposed surface per da

Monsall		Rusholme		Withington	
1953	Five yearly average	1953	Five yearly average	1953	F ye ave
4.23	4.75	2.39	2.97	1.61	1

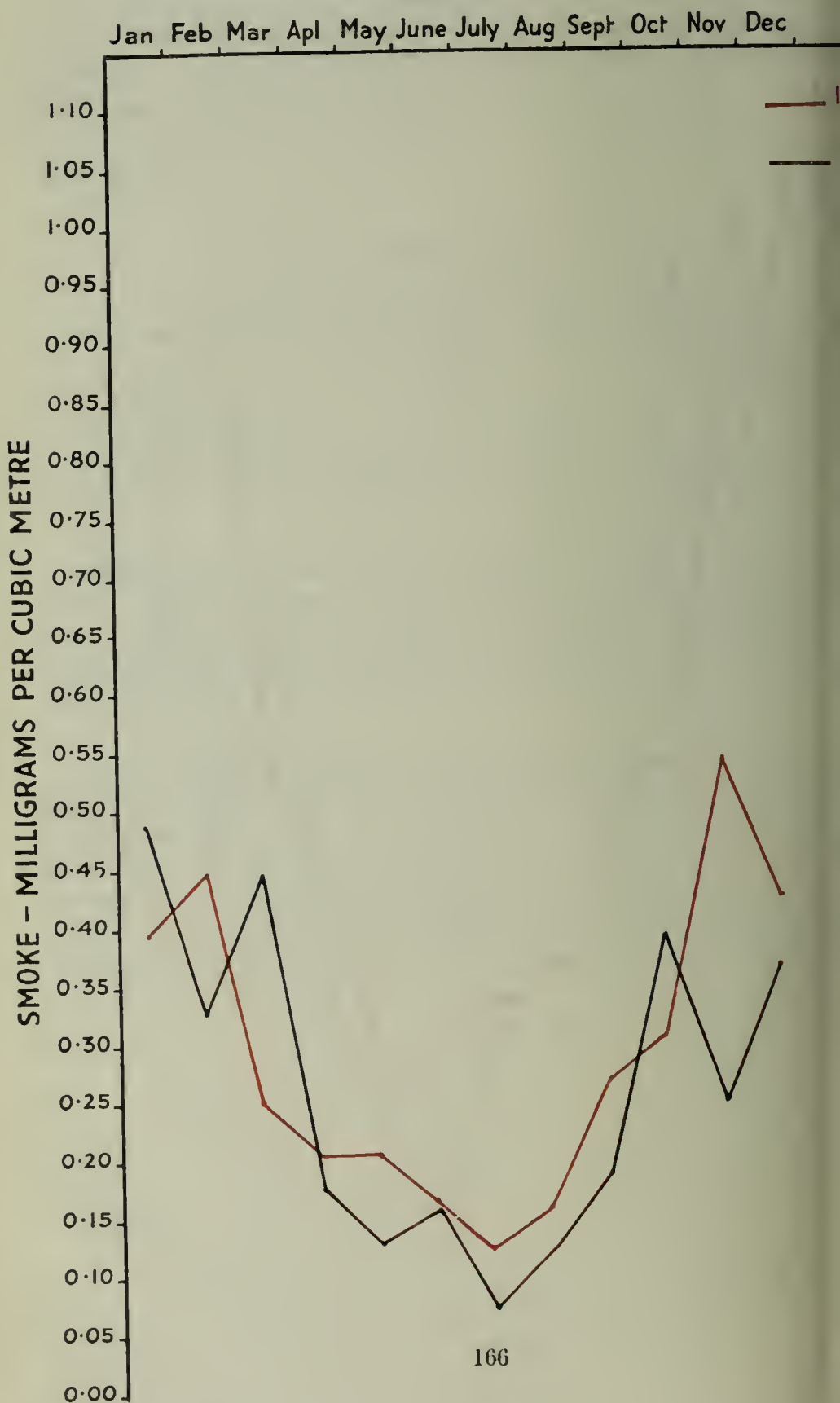
Sulphur pollution measured by the volumetric apparatus at Rusholme shows a reduction compared with the previous year. The suspended (smoke) collected by the smoke filter at Rusholme also indicates a fall compared with the previous year, and it seems probable that this may be due to reduced coal consumption.

In the accompanying graph of the suspended impurity at Rusholme it can be seen that as in the previous year the smoke pollution falls to its lowest level in July. This trend suggests that the pollution collected by this gauge is of domestic origin. The heaviest pollution of 1.314 milligrams of smoke per cubic metre occurred on the 6th March, a day on which there was both rain and fog. The lightest pollution measured was on the 18th May, a sunny day with light cloud when there was 0.041 milligrams of smoke per cubic metre of air.

Yearly cycle of sulphur dioxide by the volumetric method—
 monthly mean concentration at Rusholme in volumes.
 SO₂ per million.



Yearly cycle of suspended impurity (smoke) at Rusholme—
monthly mean concentration in milligrams per cubic meter.



the British Cotton Industry Research Association, having a particular interest in the effect of "air dirtiness" on textiles, is concerned with measurement for that purpose and in its laboratories at the Shirley Institute in Didsbury a method has been devised.

It will be recollected that with the standard smoke filter of the Department of Scientific and Industrial Research, the weight of solid suspended matter (in the atmosphere) is estimated by drawing a known volume of air (50 cubic feet) through a disc of filter paper. Each separate period of sampling lasts 24 hours, and the weight of suspended matter retained on the paper is estimated by visual or photometric estimation of the stain which is converted into a mass concentration of suspended matter by reference to a calibration curve.

Whilst based on this standard smoke filter technique, the method of the Shirley Institute differs from that of the Department of Scientific and Industrial Research in three respects and the Medical Officer of Health is greatly indebted to the Director and Council of the British Cotton Industry Research Association for the following information dealing with the method and its application to the measurement of the dirtiness of the atmosphere:—

The pumping rate is increased from 2 cubic feet per hour to 2 cubic feet per minute. Sampling periods are thereby reduced, giving rapid testing and enabling a more detailed survey of air dirtiness to be carried out than is possible with the slower pumping rate. Sampling times of between 1 and 5 minutes have been found adequate for the whole range of air dirtiness likely to be encountered in or near towns. Air dirtiness trends within an hour may, therefore, be followed if desired.

The equipment used has been made entirely automatic in operation. The atmosphere may thus be sampled at pre-determined intervals throughout day and night without human assistance.

The results are expressed in terms of the visual effect produced by the collected solid matter and not in terms of its mass concentration.

of air dirtiness.

In the laboratories of the Shirley Institute air dirtiness is expressed in terms of the measured change in the reflection factor of the filter paper of a known volume of air drawn through a known area of the paper. The unit is named the MURK, and its exact definition is given in terms of the above in a forthcoming scientific paper dealing with the automatic equipment and its applications. The range of outdoor values observed by us is from approximately 6 murks on the outskirts of a north-east Lancashire town with the wind blowing from open moorland to about 13,000 in Manchester during very severe fog. The scale of murks given in Table I will usefully describe the cleanliness or dirtiness of the atmosphere.

TABLE I.

0 to 50 murks	..	outstandingly clean air
50 to 100 murks	..	"clean" air
100 to 250 murks	..	moderately clean air
300 to 600 murks	..	fairly dirty air
800 to 1,200 murks	..	unpleasantly dirty air
1,200 murks	..	light fog
1,000 to 6,000 murks	..	dense town fog
over 10,000 murks	..	"pea-souper" fog

Results.

Most of the data given in this report refer to the outdoor atmosphere at the Shirley Institute in Didsbury, where the air was sampled at a height of 30 feet above ground level in order to avoid local disturbances such as traffic, etc. A few data are given for the outdoor air in Sackville, Manchester, sampled at a height of about 50 feet above street level.

Table II gives the approximate average values for the dirtiness of outside air at Didsbury from June to December, 1953.

TABLE II.

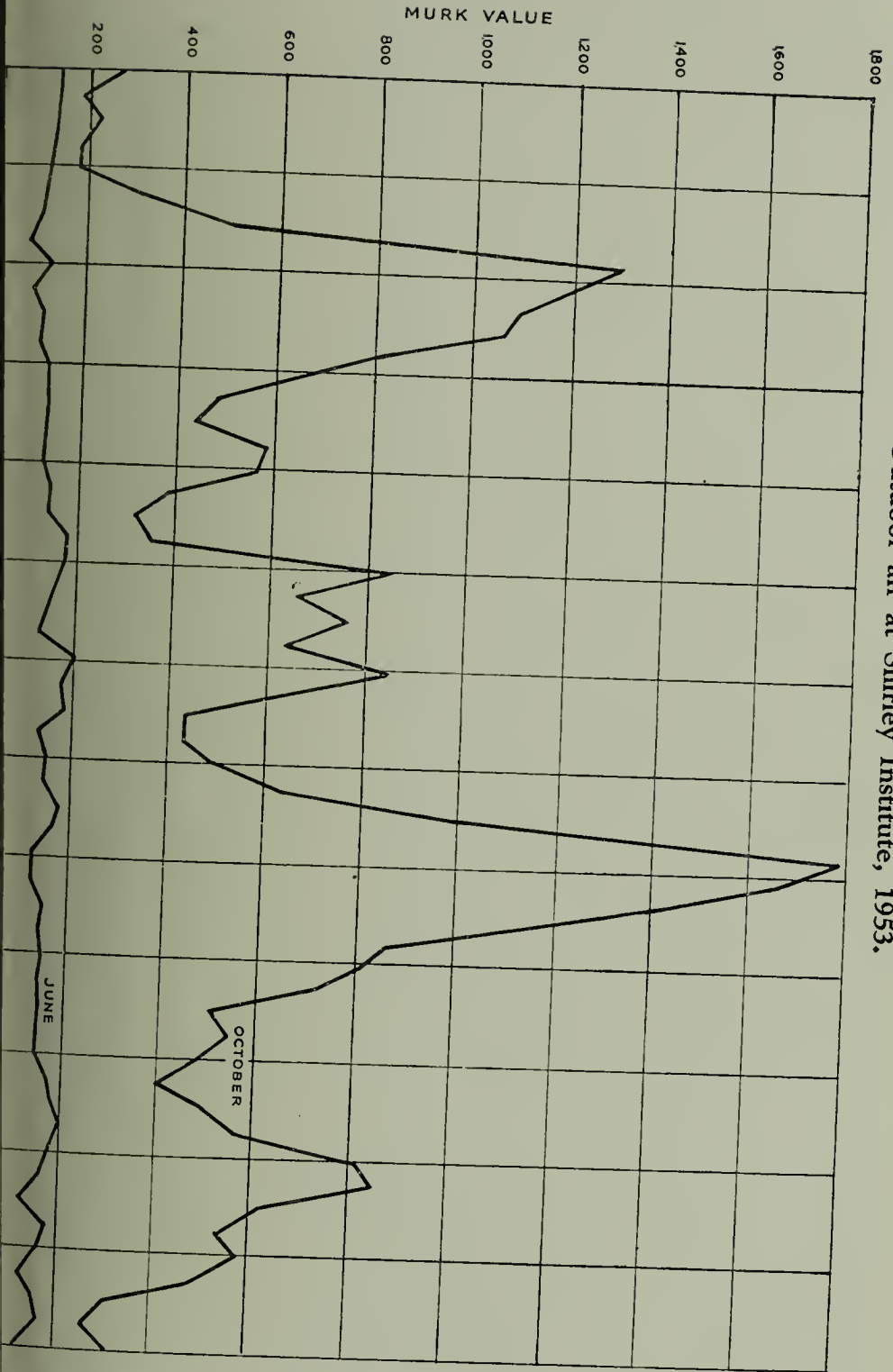
June	130 murks
July	40 murks
August	50 murks
September	130 murks
October	650 murks
November	200 murks, except during foggy periods, when values up to 13,000 were obtained.
December.. .. .	250 murks, except during foggy periods, when values up to 13,000 were obtained.

Apart from odd days, November and December, 1953, were more exceptional and unseasonal mildness and clarity at Didsbury. Even in the summer the general level of air dirtiness is lower in the summer than in the autumn and early winter. A striking difference was observed between the trend in air dirtiness in settled weather during the summer and during the later months at Didsbury. Typical trends are shown in Fig. 1. During the summer months there is no appreciable change in air dirtiness throughout day and night, a remarkably consistent diurnal trend in settled weather during the autumn and early winter months with a maximum cleanliness at 5 to 6 a.m. and maximum dirtiness at 6 to 7 p.m.

Hourly records of air dirtiness at Didsbury from 17th to 25th November 1953, are plotted in Fig. 2. The weather at Didsbury on 17th November was foggy. This was the day of Princess Margaret's visit to Manchester City centre where, it is understood, the pollution was more intense at Didsbury. The following 7 days at Didsbury were, however, of exceptional mildness and clarity for November, and the average level of air dirtiness over that week was about 190 murks, only slightly higher than the value for June (130 murks). This represents exceptional atmospheric cleanliness for November—the average value for October was 650. The diurnal trend referred to above in connection with Fig. 1 is shown in Fig. 2 to be consistent throughout the week of settled November weather.

Although the air dirtiness trend appears to be roughly predictable during settled weather in the residential district of Didsbury, it is not means predictable during unsettled weather. The effect of an episode of foggy conditions is shown in Fig. 3 which gives graphically the air dirtiness during such conditions.

Fig. 1.
Outdoor air at Shirley Institute, 1953.



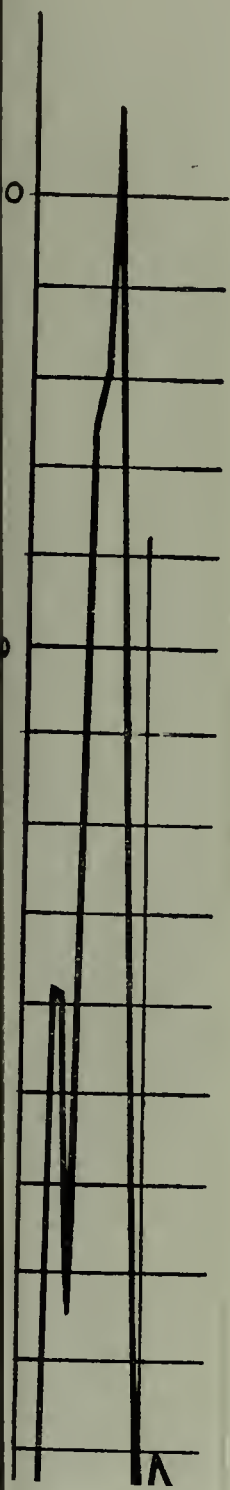
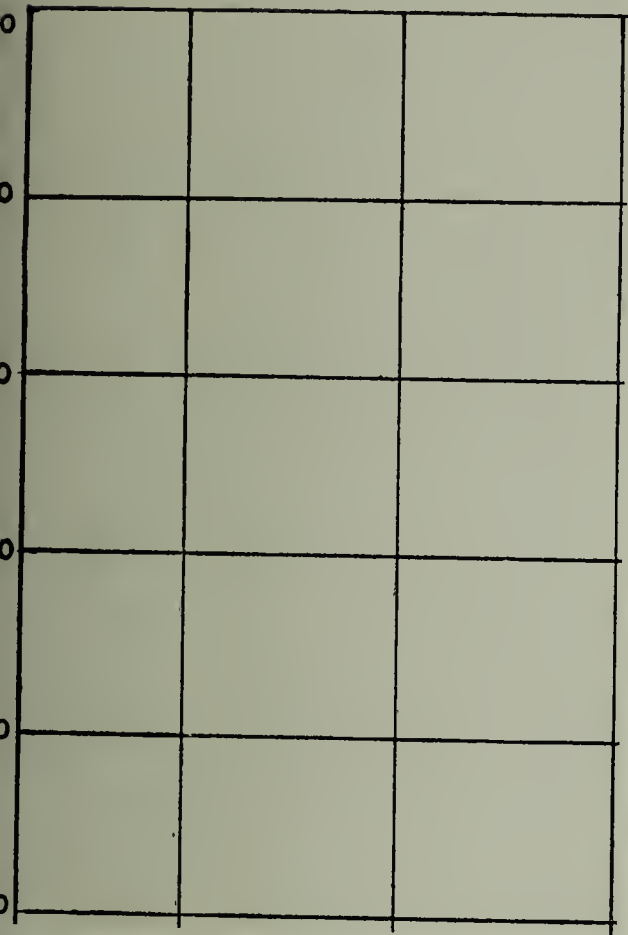
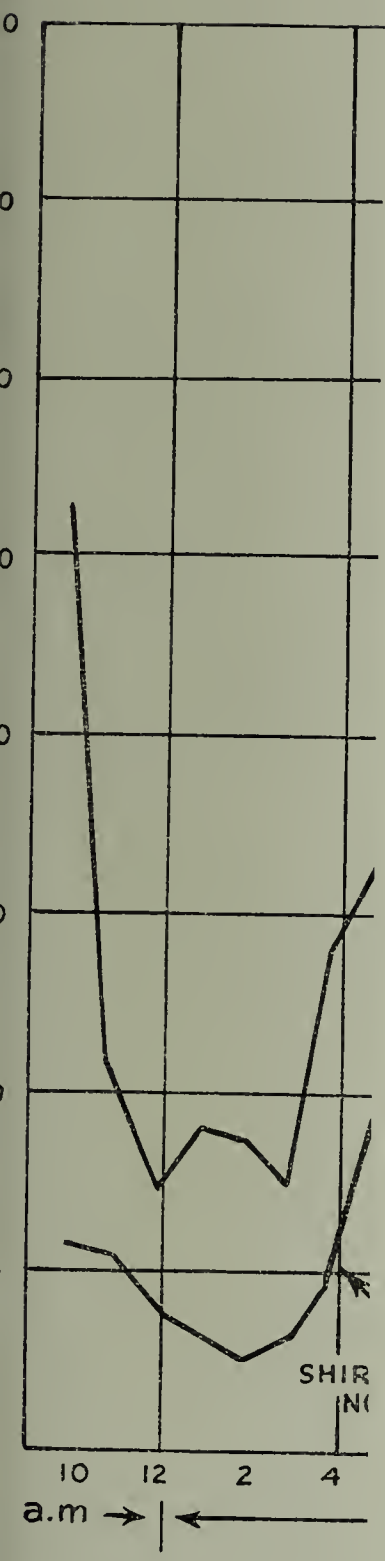


Fig
Outdoor air at Shirley Institute from
31st Decem





ata for a 24-hour period from 9 p.m. on December 30th to 9 p.m. on December 31st, 1953. The data were obtained with the automatic equipment set to operate at intervals of 10 minutes, so that 145 records of air dirtiness were obtained during the stated time interval. The settled conditions of late December 30th and early December 31st were upset by the onset of foggy conditions during the morning of the 31st, and these conditions persisted in varying, and, generally, in intensifying degree until the tests were stopped at 9 p.m., by which time a "pea-souper" fog had engulfed Didsbury. Fig. 3 shows that large changes in air dirtiness can occur in short intervals of time, e.g. the murk value increased by 200 per cent. in 30 minutes between 8-40 a.m. and 9-10 a.m. on December 31st.

Fig. 3 illustrates an advantage of the high sampling rate made possible by the adoption of a fast pumping rate. The average murk value over the 24-hour period is of the order of 2,500 murks, but a single exposure of 30 minutes' duration would have given no indication of the very great variation in air dirtiness which occurred during that period, viz.: from 100 to 12,900 murks, an increase of roughly 750 per cent.

Early in November, 1953, the automatic equipment was set up at the Manchester College of Technology to sample the outdoor air in Sackville Street at a height of about 50 feet above street level. At intervals during the day, corresponding tests were made outdoors at the Shirley Institute in order to obtain a comparison of the dirtiness of Didsbury and of City Centre. The tests at the Shirley Institute were made with a manually operated instrument and are consequently fewer in number. The results obtained are shown graphically in Fig. 4; they indicate a similarity of trend in air dirtiness in Sackville Street and in Didsbury during the short period of the tests, and show that at certain times during this period the murk value in Sackville Street is roughly twice the value at the Shirley Institute."

HOUSING CONDITIONS.

In the latter part of the year, following the publication of the Government White Paper on Housing, the Housing Repairs and Rents Bill received its second reading.

The vital importance of this contemplated legislation was reflected in the discussion which took place at the special housing conference convened by the Association of Municipal Corporations in December which was addressed by the Rt. Hon. Harold Macmillan, M.P., Minister of Housing and Government. The particular significance of the proposals to Manchester is clearly seen in the number of houses in the City which, by reason of defects, serious disrepair, bad arrangement or the narrowness or bad arrangement of the streets, are unfit for human habitation and the corresponding high incidence of work in securing repairs. Further, the extent of the structural decay of so many houses concerned is such that repeated repairs are undertaken with the object of providing no more than wind- and weather-tight cover and freedom from serious dampness. This applies particularly to the condition of roofs and is demonstrated by a close co-relation between large numbers of complaints and heavy rainfall.

During the year, approximately 56,000 inspections were made by district sanitary inspectors and 15,260 preliminary and statutory notices served upon owners to remedy defects. In 200 cases it was necessary to take legal action; in most of these cases the notices were complied with at the time but 89 nuisance orders were granted by the magistrates and in 2 instances were imposed.

The experience of the Department in procedural delays in securing repairs, especially to houses with no known owners (63 such houses dealt with during the year) has been such that, at the end of the year, the Council was seeking power in a Corporation Bill to provide speedier action for that purpose.

Similarly, post-war experience of numerous sub-standard houses in which rent is not being collected has shown distinct limitations in the powers available to the Corporation to require information as to the ownership. In one instance the former owner of some unfit dwelling-houses refused to disclose the identity of the purchaser who did not choose to exercise a right of ownership and could not be traced by the Department. These circumstances have prompted the Corporation to seek power to compel any person who has sold or otherwise disposed of, leased or let, any premises in the City, to provide the name and address of the person to whom the property has been so transferred.

Repairs to deal with nuisances were carried out by the Department on 422 houses at a total cost of £4,756 either in default or at the request of the owner upon whom Public Health Act notices had been served. This work under the Public Health Act procedure dealt only with the minimum amount of work necessary to abate the prevailing conditions causing nuisances and the cost of the work incurred varied correspondingly. In some instances, where the disrepair included extensive dilapidation of roofs and gutters, etc., the cost ranged between £130 and £180 per house although the average cost for the 422 houses was only slightly more than £11. Unfortunately, as in the past, earlier, the general condition of so much of this property is such as to require recurring action to deal with deterioration causing a state of nuisance. Work was carried out at 657 premises on the maintenance of public health under the provisions of Sections 23 and 24 of the Public Health Act 1936. The total cost of this latter work undertaken by the Department was £1,200 which was charged to the owners concerned.

applications for certificates of disrepair under the Rent and Mortgage, etc., Restrictions Acts were few, only 9 being received, and certificates were issued by the Committee in 6 cases. In the remaining 3 instances, the Town Clerk has advised that the particular houses were subject to "new" control under the 1939 Act, certificates of disrepair would not have enabled the tenants to withhold the permitted increase of rent and the applications were not proceeded with.

A report was granted to an owner under the provisions of the Rent and Mortgage Interest Restrictions Act, 1923, that the house had been placed in a suitable state of repair; defects which had previously caused the issue of a certificate of disrepair having been remedied.

During the year the detailed inspection of houses for possible inclusion in clearance areas was resumed. The rate at which areas of old, worn-out and dilapidated dwellings can be cleared, however, is a matter of grave concern, the rate of which clearly depends on the outcome of the Corporation's applications for planning permission to develop land outside Manchester. In the meantime the incidence of deterioration is reflected in the increasing number of unfit houses which become so structurally dangerous as to compel prompt rehousing of the occupiers and demolition of the property. Within the past twelve months, 657 of such houses were demolished.

Clearance areas.

In connection with a planned approach to the clearance of unfit houses a local inquiry was held by the Minister of Housing and Local Government on the 21st October, 1953, when objections to the Ridgway Street (Ancoats) Compulsory Purchase Order, 1953, were heard. The Order involves the clearance of houses and the decision of the Minister is awaited.

A survey of the St. George's Clearance Areas, originally represented to the Minister of Health in 1939 as containing 1,183 houses, revealed that only 641 houses were in existence, 542 houses having been demolished as a result of structural damage, serious dilapidation and structural danger. An official representation dated 3rd July, 1953, involving 504 of the remaining unfit houses was considered by the Health Committee and the Liaison Sub-Committee appointed by the City Council is considering whether any portions of the areas should be included in a Compulsory Purchase Order.

Subsequent to the date of the representation, the structurally dangerous condition of 20 of the houses became such as to compel demolition.

The number of houses in the Ridgway Street and St. George's clearance areas on the 31st December, 1953, was 722, involving the rehousing of 703 houses. Should the orders be confirmed by the Minister of Housing and Local Government.

The inspection and survey of a further area of approximately 770 houses in the clearance areas is completed and will be considered for action under Part III of the Housing Act, 1936, in the immediate future.

Clearance areas.

There are eight outstanding clearance areas which were represented prior to 1953, where Clearance Orders were made by the City Council, but did not proceed to the stage of public Local Inquiry and have remained in abeyance.

The areas include, St. George's, Hutchins Street, Harpurhey, Street, Enoch Street, Ruth Court, Fog Lane and Oldham Road (New) with a total of 1,907 houses of which 800 houses have in the meantime been demolished as a result of war damage, serious dilapidation and structural danger, leaving 1,107 houses still to be dealt with.

The total number of houses demolished in post- and pre-war areas during the current year is 64, and 57 families have been displaced, of which 53 were rehoused by the Corporation.

Individually unfit houses.

16 houses owned by "a man of straw" were represented as unfit for human habitation under the Housing Act, 1936, Section II, and demolition orders were made by the City Council. The families have been rehoused by the Corporation; 6 of these houses have been demolished and the remainder are in course of demolition.

12 houses represented in previous years are unoccupied and the entrances are bricked up. The houses have not been demolished as such action might affect the stability of adjoining properties.

When an application is made by a property owner for permission to demolish an occupied dwelling-house under the provisions of the Manchester Corporation Act, 1946, Section 31, the Corporation will not undertake to rehouse the occupants unless the house upon careful inspection is found to be "unfit for human habitation and structurally dangerous." The increasing number of voluntary applications from owners and agents is indicative of the serious unfit condition of areas of dwelling houses, mainly situated in the inner parts of the City, in such an advanced stage of disrepair and dilapidation, that the old houses are in grave danger of collapse. 632 such houses were found to be unfit for human habitation and certified by the City Architect as structurally dangerous.

657 houses were reported by the City Architect as having been demolished during the year, but some of these demolitions represented houses which were already dealt with and the work commenced during the preceding year.

594 families from individually unfit houses have been rehoused by the Corporation and 20 families found their own rehousing accommodation. There are 221 families to be rehoused from unfit and structurally dangerous houses at the end of the year and 402 houses await demolition.

Applications for rehousing on medical grounds.

The increase in the number of applications again focuses attention on this major social problem, bad housing. Letters from hospital authorities, doctors, welfare organisations and many other sources are regularly received stressing the hardships and the detrimental effect of sub-standard and crowded housing conditions upon the health of the applicant families. Each case is carefully considered and if the medical circumstances warrant it, an award for preferential rehousing is given and the Director of Housing is informed. Unfortunately, in many cases there is unavoidable delay in rehousing these families owing to the shortage of new houses.

2,235 cases were dealt with during the year, of these 1,625 or 72% were granted warranted preference for rehousing on medical grounds. The number of cases offered rehousing accommodation by the Corporation under this heading was 845.

ment of overcrowding.

has not been practicable for the Department to maintain an accurate of the precise incidence or nature of the overcrowding of houses but it own that at least 1,968 dwelling-houses were overcrowded under the al Standard on the 31st December. This figure includes 177 new cases crowding reported during the current year. Details are as follows :—

roximate number of overcrowded houses	Number of families	Adults	Children
ouses with 1 family	1,221	7,645	2,537
, „ 2 families	1,136	4,026	1,211
, „ 3 „	423	1,032	278
, „ 4 or more families	152	451	185
	2,932	13,154	4,211

1 of the above families are occupying houses which are too small for requirements and 747 houses are overcrowded by reason of lodger

l cases of overcrowding brought to the notice of the Department, the of Housing is informed if the tenant and/or lodger families are d for a Corporation house.

Your Homes Scheme.”

nce Regulation 68 CB relating to the sharing of homes was repealed th December, 1952, so far as the registration of new accommodation rned, but existing registrations are not yet affected and the number of r registered as being sub-let within the scheme is 188.

let in lodgings.

cordance with the byelaws made under Section 6 of the Housing Act, house “intended or used for occupation by persons of the working and let in lodgings or occupied by two or more lodger families should ed to the Department. Lodger families, however, do not include sons or daughters living with their parents.

ere are 1,107 houses so registered but, in spite of the byelaw requirement tification to the Department, it is not considered this figure truly s the total number of houses let in lodgings in the City. Invariably, ications arise from visits being made for other purposes by the district nspectors, and, owing to staff depletion, it has not been practicable the necessary supervision of all registrable premises.

nspections were made of the registered houses to check on the ce of byelaw requirements directed to sanitary accommodation, lighting of rooms, staircases and passages, cooking and washing and cleanliness of the premises. It was necessary to issue cautions rances concerning dirty conditions, whilst 18 informal and 9 formal ere served to compel attention to the Department’s requirements.

The houses visited included those which are subject to the provisions of Section 57 of the Manchester Corporation Act, 1950, dealing with the and management of houses let in lodgings by persons not residing on the premises. The additional power available over this type of house has been found to maintain the improvement in the general standard of the premises recorded in previous years.

Common lodging houses.

One common lodging house which had provided accommodation for 1000 men has closed down since the last annual report and there are now 1000 houses 2 of which (for 464 men and 210 women respectively) are owned by the Department and 3 by social organisations. These, together with the remaining 5 privately owned establishments (for 251 men), provide accommodation for a total of 1,478 men and 210 women.

In the report for last year, reference was made to an appeal being brought to the City Magistrates' Court against a refusal of the Corporation to register the registration of one privately owned lodging house. Since that date the Corporation's requirements concerning the proper maintenance of the premises of escape in case of fire becoming satisfied, the registration was renewed.

In cases where the standard of maintenance is found to be unsatisfactory the renewal of the registration of the premises is granted only for a shorter period than the customary twelve months and the keeper is required to carry out the requisite works of repairs or renewals before the expiration of the period. In one such case, where the means of escape in case of fire was found to be defective, the period of registration was limited to three months. As the work having been attended to within that time, the registration was renewed for the usual period of twelve months.

In view of common lodging houses being so liable to become infested with vermin, particularly body-lice introduced by more casual lodgers, attention is directed to this aspect in the course of inspections made. It is required to use insecticides with a residual toxicity as a routine measure and lodgers are encouraged to attend the Department's clinic at Monsal for personal cleansing and disinfection of their clothing. 269 such treatments were given compared with 317 during the previous year.

Caravan dwellings.

The unauthorised use of land in various parts of the City by itinerant dwellers, more especially of the nomadic type, continued to create insanitary conditions on the sites and to cause numerous complaints from residents in the vicinity.

452 inspections were made and in many cases verbal cautions by inspectors resulted in the removal of the offenders but, in 54 cases, it was necessary to serve nuisance abatement notices; in 16 cases, including 3 from 1950, proceedings ensued.

reference was made in last year's report to the refusal of an application under Section 269 of the Public Health Act to allow the use of land for a site suitable for dwellings and to deferment of the institution of legal proceedings for a period of six months to allow the van dwellers to secure other accommodation; in this respect an application for an extension of the period was refused and legal proceedings resulted in the owner of the land and four van dwellers still on the land being fined £1 each whilst summonses against the van dwellers who had left the site were adjourned *sine die*. Subsequently, the owner again unsuccessfully applied for a licence to use this land for a site suitable for dwellings. Further legal proceedings are pending because the site is not yet in use.

boats.

Supervision of canal boats used as dwellings and for the conveyance of goods is secured under the provisions of the Public Health Act, 1936, and the Canal Boat Regulations of 1878. The number of inspections was 608 and the standard was found to satisfy the requirements of the regulations made in the latter part of a century ago. Only 5 infringements, affecting 4 boats, were detected and notices have been served in these cases. The infringements were the absence of certificates, marking and painting.

A new boat, motor propelled, was registered during the year and there were 199 boats registered, 13 of which are propelled by oil motor, the remainder being horse drawn.

Although the Manchester canal carrying companies do not allow women to work on their boats, if other canal boats in which women and children are employed on the canals within the City, the occupiers are advised as to the services available.

OCCUPATIONAL CONDITIONS.

Factories Act, 1937—inspections of mechanical and non-mechanical factories, etc.

Premises	Number on register	Inspections	Number of written notices	Occupiers prosecuted
Premises in which Sections 1, 2, 3, and 6 are to be enforced by the local authority	543	104	4	—
Premises not included in (i) in Section 7 is enforced by the local authority	4922	2384	20	—
Premises in which Section 7 is enforced by the local authority (excluding outwork-premises)	40	64	1	—
Total	5505	2552	25	—

Cases in which defects were found.

Particulars	Defects			
	Found	Remedied	Referred to H.M. Inspector	By H.M. Inspector
Want of cleanliness (Section 1)	11	5	—	11
Overcrowding (Section 2)	—	—	—	—
Unreasonable temperature (Section 3) . .	1	—	—	—
Inadequate ventilation (Section 4)	—	—	—	—
Ineffective drainage of floors (Section 6)	—	—	—	—
Sanitary conveniences (Section 7)				
(a) Insufficient	11	3	—	10
(b) Unsuitable or defective	221	166*	—	179
(c) Not separate for sexes	30	34†	—	22
Other offences against the Act (not including offences relating to outwork)	16	1	14	—
Total	290	209	14	222

* Includes 73 from previous year..

† Includes 13 from previous year.

Factory outworkers.

Premises in which certain classes of work are carried out in the homes are supervised under the provisions contained in the Factories and the Public Health Act relating to the employment of persons in unwholesome premises and to the prevention of the spread of infectious disease.

The number of firms in the City employing homeworkers has during the year from 454 to 473 and the number of homeworkers has risen to 3069 of whom 2155 are resident within the City. The remaining 914 are outside the City boundaries and notifications of this employment have been sent to the local authorities concerned. There are also the homeworkers employed by firms situate in other districts who carry on their work in their homes in Manchester. The increase in the number of outworkers in the clothing trade in which approximately 70 per cent. of the outworkers are engaged, and, to a lesser degree, in the household linen and soft goods trades.

Inspections of outworkers homes carried out by female inspectors in general, a high standard of cleanliness; the need for cautions arising in only 8 cases where unwholesome conditions were found which were subsequently remedied. Sanitary defects in 10 homes were attended to by the issue of informal or statutory notices upon the owners concerned.

In two cases where notifiable infectious disease occurred, the premises were suspended until all risk of spread of infection had been eliminated.

The occupiers of 31 factories failed to keep proper records of homeworkers names and addresses as required by the Act, but the omissions were subsequently remedied as a result of informal action.

and employment of young persons.

8 visits were made by the sanitary inspectors in connection with the operation of the provisions of the Shops Act, 1950, and the Employment of Young Persons Act, 1938. Except for the closing of shops in the evening on Sundays, which is dealt with by the Chief Constable, all the remaining duties are delegated to the Department.

Enforcement action secured prompt attention to the provision of the prescribed minimum hours to assistants' weekly half-holidays in 19 instances, hours of employment of young persons in 7 and as to seats for female shop assistants at 13 shops.

Enforcement action was necessary in regard to 6 shops where the ventilation was insufficient and 3 where a sufficient temperature was not being maintained. Enforcement was also taken in regard to 13 shops where the washing facilities were inadequate, at 8 shops where the sanitary conveniences were unsatisfactory and 10 shops where assistants were required to take their meals on the premises and where suitable facilities were not provided. In each case, the omissions or deficiencies were rectified without recourse to statutory proceedings.

Enforcement proceedings regarding heating in 1 shop, washing facilities in 2 shops and provision for meals in another, outstanding from 1952, were also remedied.

Enforcement action for exemption from compulsory closing on Sundays was sought by and granted to 10 firms observing the Jewish Sabbath and one registration was cancelled—there are now 283 persons so registered with the Department under the provisions of Section 53 of the Shops Act, 1950.

Applications for Certificates of Exemption from compulsory half-day closing were granted in respect of 4 exhibitions, the retail trade being subsidiary to the main purpose of the exhibitions.

Under Section 8 of the Young Persons (Employment) Act, 1938, 1 firm was notified that the provisions of the Shops Act, 1950, shall apply to all young persons in their employment.

During the year, the Home Office issued draft proposals for extensive new legislation dealing with the closing hours of shops, half-day closing of shops, assistants' weekly half-holidays which closely follow the recommendations of the Government Committee of Enquiry on Closing Hours of Shops issued in 1947. Earlier suggestions of the Home Office to deal with the health, safety and welfare of non-industrial workers involving new legislation and amendments to the existing Shops Act had also generally recognised the recommendations contained in the Report of a Committee of Enquiry issued in 1949, and during the year have been the subject of detailed consideration by interested organisations.

Implementation of these proposals, with especial regard to the control of shop hours, will entail a considerable expansion of the responsibilities of local authorities and their sanitary inspectors but the Home Secretary has stated that immediate enactment of the suggested legislation is not intended.

GENERAL SANITARY CONDITIONS.

Infectious diseases and food poisoning.

Following notification to the Department of outbreaks of infectious investigations were made by the district sanitary inspectors into the acute encephalitis, acute poliomyelitis, cerebro-spinal fever, dysentery, erysipelas and scarlet fever.

1,865 visits were required in 1,664 cases notified in the different wards of the City and enquiries were made to establish the source of the infection, isolation, to trace contacts, to prevent the spread of infection via food (including milk and ice cream) or other media, and to make arrangements for the treatment of articles exposed to infection.

747 visits by the inspectors were also necessary to trace persons who had been in contact with infectious diseases including 606 contacts with infectious patients.

Investigations by specialist sanitary inspectors were made in connection with 40 outbreaks of food poisoning. The results are listed in a separate statement in the section of the report dealing with Epidemiology.

It is noteworthy to record that there has been a further reduction in the incidence of food poisoning and that 25 of the outbreaks were confined to single cases whilst the remaining 15 involved 2 or more persons.

How far the reduction in the number of outbreaks can be attributed to the continuing campaign for hygiene in the handling and preparation of food cannot be accurately assessed but the portents are encouraging.

Rodent Control.

The provisions of the Prevention of Damage by Pests Act, 1949 require that every local authority shall ensure as far as may be practicable that its administrative area is kept free from rats and mice. For that purpose sanitary operatives are employed under the supervision of the executive officer and an assistant to investigate notifications or complaints in addition to maintain a continuous survey of the City.

Owners and occupiers of "land" are required to notify any suspected infestations to the local authority and are responsible for any eradication measures required on their land; similarly, the local authority is responsible for the repression of rodents on "land" in its own occupation.

Complaints of infestation.

2,800 new complaints were received concerning suspected infestation, an increase of 516 (22.5 per cent.) on the number received in 1952. It is considered, however, that this increase in complaints indicates a real increase in the infestation of the City, which is still found to be greatest in the more central oldest areas with most dilapidated property and associated drainage defects. The demolition of individual properties is most frequently in such areas and may be of some significance to the spread of infestation to neighbouring premises, but there is no evidence that these demolitions are a major factor. Clearly, however, the greater awareness of the public and the service available from the Department is most relevant to the reduction of complaints received by the Department and is invaluable in securing the early application of eradictory measures at the most important stage, the first onset of any infestation from whatever source.

522 premises (7,620 dwelling-houses and 3,902 business premises) were visited on complaints of infestation being received and infestation by rats was found at 1,733 premises (1,170 dwelling-houses and 563 business premises) and by mice at 2,262 premises (1,411 dwelling-houses and 851 business premises). The precise nature of the premises infested is indicated below :—

Nature of premises infested.

Type of premises	Number of premises				Totals
	Rat infested			Mice infested	
	Internal	External	Total		
Dwelling-houses	540	630	1,170	1,423	2,593
Shops, workshops, workplaces	165	14	179	151	330
Public houses	87	19	106	176	282
Restaurants where food is prepared, sold or served	44	5	49	77	126
Offices	72	4	76	95	171
Warehouses	20	3	23	124	147
Hotels, licensed premises, clubs	33	9	42	37	79
Public houses, welfare centres, public institutions	9	2	11	47	58
Public buildings	18	1	19	113	132
Public houses	2	3	5	7	12
Sheds, wooden structures	11	6	17	—	17
Theatres, public halls	3	—	3	6	9
Public disposal works, slaughterhouses, abattoirs	2	—	2	—	2
Public buildings	1	—	1	3	4
Public buildings	—	26	26	1	27
Public buildings	—	2	2	—	2
Public buildings	—	—	—	1	1
Public buildings	1	—	1	1	2
Public buildings	1	—	1	—	1
Totals	1,009	724	1,733	2,262	3,995

of the City.

In accordance with the requirements of the Ministry of Agriculture and Fisheries, Infestation Control Division, the survey of the City continued with a view to dealing with otherwise undisclosed infestations. 30,399 premises were visited in the course of such survey. Where infestations were found appropriate eradictory measures were applied.

Causes of infestation.

Whilst the presence of rodents, especially rats, may be due to numerous different causes, the main sources of infestation in the built-up areas of the city are sewers and drains. The implications of defective drainage allowing eggs of rats are of course emphasised when such conditions are associated with structural defects of premises such as missing or broken basement window floor space ventilators and short doors.

Considerable work is commonly entailed in the tracing of drainage sources of infestation and the necessary repair or renewal of defective drains or sewers. Where sewers under the control of the City Surveyor's Department are involved, the active co-operation of the divisional engineers of that Department is required; otherwise the conditions are dealt with either by owners or occupiers of premises concerned on representation from the Sanitary Services Division or by that Division at the expense of the owners.

Classification of causes of rat infestation in premises primarily visited during 1951

Cause	Rat-infestation				Total premises rat-infested	Percentage of total rat-infested
	Internal		External			
	Business premises	Dwelling-houses	Business premises	Dwelling-houses		
Directly due to or associated with defective or disused drains or sewers	27	57	24	229	337	19.50
Nature of business in premises or vicinity	94	6	25	1	126	7.27
Tips, refuse accumulations, market areas	12	15	4	17	48	2.76
Neglect in protecting food and food scraps	278	360	25	186	849	48.93
Poultry kept	—	—	1	15	16	.92
Dilapidated premises, defects in structure	43	40	2	19	104	6.00
Building operations, demolitions ..	3	—	1	2	6	.34
Vicinity of open or culverted water-courses	1	3	1	9	14	.80
Railway sidings	—	1	—	—	1	.05
Casual infestation	11	58	11	152	232	13.38
Totals	469	540	94	630	1,733	100.00

Tracing of rat burrows in relation to drainage infestation.

Conditions found and action taken as a result of examinations	By City Surveyor	By owners and occupiers	By Sanitary Services Division	Totals
Number of examinations made	150	81	38	269
Drains reconstructed	3	—	—	3
Defects in sewers repaired	78	—	—	78
Blocked privy-midden drains removed	32	23	—	55
Disused drains or sewers removed or otherwise dealt with	34	—	7	41
Leaking drains remedied.. .. .	14	36	28	78
Leaking drains and sewers repaired by Corporation at owner's expense.. .. .	7	—	10	17
Blocked drain inlets repaired	13	—	—	13
Blocked burrows consolidated	31	6	—	37
Leaking burrows consolidated	19	15	3	37
Infestation remaining found to be due to causes other than rats	16	1	—	17
Totals	247	81	48	376

Disinfection service of the Department.

The disinfection service available from the Department is increasingly known and used by owners and occupiers of infested premises. No charge is made in respect of tenement houses but, in accordance with the requirements of the Ministry, where the treatment is undertaken at business premises at the request of owners or occupiers, the cost, based on the operator's time and material used, is recovered from the persons so concerned. 2,971 treatments (representing an increase of 39.8 per cent. on the year 1952) were effected, as follows:—

- 952 (32.4 per cent.) for rat infestation, and
- 2,019 (67.6 per cent.) for mice:
- 2,817 treatments were by poisoning (including "Warfarin");
- 59 by a combination of poisons and trapping;
- 93 by trapping alone;
- 2 by gassing.

In the course of these treatments 173,332 baits were laid: 50,906 of these were rat poison baits of which 27,319 (53.5 per cent.) were taken.

Number of dead rats picked up	1,105
Number of dead mice picked up	4,368
Estimated kill (based on poison baits taken)	36,088

Extermination by private operating companies.

Numerous operating companies undertake the treatment of some premises under contract with owners and occupiers. These companies under no obligation to notify the Department of the results of their treatment and it is not possible to estimate the number of rodents so destroyed.

Extermination by other Corporation departments and nationalised undertakings

Other departments of the Corporation and nationalised undertakings with infestation of their particular premises and reports received indicate during the year, a total of 609 poison baits were laid, of which 415 were adopted, trapping, etc., by such authorities, cannot be computed accurately it is known that 755 dead rats were picked up.

Extermination of rats in public sewers.

This work is carried out by a special staff of the City Surveyor's Department which undertakes a baiting routine of the sewers.

Particulars of the work done during 1953 is tabulated below.

Treatment	Number of manholes test baited	Number of manholes baited	Number of manholes baited
Balance of initial treatment—			
No. 2 maintenance	—	869	869
Test bait	2 840	—	2 840
No. 1 maintenance treatment	—	8,998	8,998
No. 2 maintenance treatment	—	3,374	3,374
Totals	2,840	13,241	13,241

Re-visits to treated premises.

Frequent visits are made to check the efficiency of the work carried out on premises where infestations have been discovered and appropriate measures have been taken. These re-visits continue until there is no further evidence of infestation. 7,056 re-visits were made by the operators to 5,165 premises. 5,165 of such premises were found to have been cleared of infestation. This total includes the 2,078 premises cleared by Corporation treatment, the remainder having been dealt with satisfactorily by occupiers or other companies.

In addition to the above re-visits an average of 5 visits are involved in carrying out of treatment and, to complete 2,971 treatments during the year 14,865 such visits were made.

Elimination of insect pests.

In the course of inspections in proposed clearance areas, 481 houses were found to be infested with bed bugs, whilst the tenants of 158 other privately-owned houses in the city were also advised as to the application of suitable measures to deal with similar infestations. 123 houses, owned by the Corporation, were found to be so infested and disinfection of such houses undertaken by the Housing Department by the use of D.D.T. solution. The Housing Department also found it necessary to disinfect the furniture, etc., of 13 families allocated to Corporation houses.

In addition to bedbug infestations, information was sought on the identification and control of houseflies and blowflies, biting flies (especially mosquitoes), parasitic insects (lice, fleas), food pests (cockroaches, crickets and various forms attacking stored food) and fabric pests (clothes moths and carpet beetles). Rare or unusual species were referred to the entomologist at the Manchester Museum for identification. In most cases, however, the species encountered have been readily identified by the sanitary inspectors who have advised the application of appropriate eradication measures.

In one instance, insects (dermestidae and blow flies) from a common source were causing a nuisance to a neighbouring firm and occupants of dwellings in the vicinity. This resulted in an injunction being sought by one of the complainants. At the hearing, the sanitary inspector who had been appointed to attend was questioned on the identification, life history, and control of the insects. This was given to the satisfaction of the Recorder and the counsel engaged.

Sanitary works (defects and repairs).

Examination of drains.

The authority to examine drainage systems is contained in Section 48 of the Public Health Act, 1936, and the procedure to be followed to obtain entry to premises is prescribed in Section 287 of the Act. By this procedure it is the duty of the Department to ensure that occupiers at premises are given at least 24 hours written notice of the Corporation's intention to examine the drains at the specified premises.

During the year, the drains at 181 premises were examined; 132 were formal examinations, the remainder being informal by agreement with the owners or occupiers of the premises. Defective drains were found at 174 of the premises and statutory notices were served under Section 39 of the Act requiring the repairs required at 163 of the premises, repairs being carried out immediately at a further 8 of the premises whilst the 3 remaining cases were referred for action by the City Surveyor's Department.

The need for the examination frequently followed complaints arising from leakages of water or drainage liquid into floor cavities, cellars, basement etc., subsidences and settlement of flagged or paved surfaces of cellars, passages, paths, passages, offensive effluvia in or around premises, evidence of rat infestation in premises and stopped drains.

Drains and sewers.

Under provisions of the Public Health Act, 1936, extended by the Manchester Corporation Acts 1946 and 1950, the Medical Officer of Health or Sanitary Inspector is empowered to serve a notice requiring attention within a specified time to choked drains, etc., and in this manner there is the minimum delay in bringing attention to very objectionable conditions causing serious nuisance.

and inconvenience. Similarly, if immediate action is necessary, stoppage lengths of public sewers can be summarily dealt with. Defective lengths of public sewers not needing such urgent action are the subject of formal notices served upon the owners of the premises concerned.

These provisions have removed delay associated with normal procedure under the Public Health Act, 1936, and have been used with effect and justification. 564 notices were served for stopped drains at 576 premises and 151 reports were made for immediate action in connection with stopped public sewers affecting 578 premises during the year. There was no criticism from the owners of properties regarding the summary action taken in connection with the stopped drains or public sewers.

The expenditure so incurred is recoverable by the Corporation and in some instances, the owners of premises served by defective lengths of public sewers were not aware of their liability for the cost of the work executed. In all these cases, however, the explanations given satisfied the owners concerned.

Sanitary accommodation.

There are 372 (approximately 0.15 per cent.) premises in the City, and in the Wythenshawe area, where the closet accommodation is not of the water carriage system. The majority of these premises have no sewer within reasonable distance whilst others are situated in potential clearance areas.

The continued development of Wythenshawe and the resumption of clearance of unfit houses virtually will secure the abolition of this obsolete form of convenience in the City.

Conversions or demolitions have taken place at 29 premises and the Department is in communication with owners of several other dwelling houses where sewers have become available, with a view to the replacement of closets by waterclosets.

When temporary conveniences are required for employees engaged in building operations, where the installation of water-closets is not practicable, pailclosets are provided and are subject to approval by the Department. Arrangements are made by the Cleansing Department for collection and renewal of pails. Subsequently, they are subject to supervision to ensure compliance with departmental requirements.

A considerable number of conveniences together with wash-hand basins, baths, sinks, etc., are installed each year in existing premises to comply with the provisions of the Factories, Public Health, and Shops Acts and by owners or voluntarily to improve existing accommodation. Plans and particulars of 39 schemes were submitted and approved during the year, and all Corporation's requirements observed.

Tipping of refuse.

36 privately owned sites were in use, some intermittently, for the deposit of trade refuse and building debris of an inorganic nature and were visited by the district sanitary inspectors to prevent nuisance arising. This survey was particularly necessary at sites used intermittently which appeared more liable to indiscriminate dumping of refuse by unknown persons.

At one disused colliery tip, the National Coal Board maintained measures adopted, whilst not extinguishing combustion, kept the colliery under control and prevented nuisance arising.

The refuse collected by the Cleansing Department amounted to 199,726 tons, of which controlled tipping disposed of 150,636 tons, the remainder being disposed of by separation and incineration. 3 sites in the northern area of the City and 1 in the southern area were in use for that purpose, and close co-operation was maintained with the Cleansing Department to ensure observance of prescribed precautions against nuisance occurring.

Offensive trades.

The following trades prescribed as "offensive trades" under the provisions of the Public Health Act, 1936, and the Manchester Order of 1921, were carried on at 57 registered premises in the City: 1 blood albumen maker, 3 bone meal and size manufacturers, 2 fat melters, 2 fish curers, 1 fish curer and bone manufacturer, 1 gut scraper, 1 oil distiller, 2 pickle and sauce manufacturers, 21 rag and bone dealers, 7 rubber spreaders, 3 rubber substitute makers, 1 size maker, 2 soap boilers, 2 tallow melters, 3 tanners and 5 tripe curers and dressers.

Having regard to the risk of nuisance arising from the particular nature of these businesses, most being concerned with the treatment of organic matter, close supervision was exercised over the trades. Co-operation was also maintained with the City Surveyor to ensure that the Department was made aware of applications under town planning provisions in respect of any proposed establishment of such trades.

Statutory action under the Public Health Act was necessary, in one instance, to deal with nuisance from the storage and treatment of animal matter at a long-established business, and a nuisance order was made by the City Nuisances' Court. Considerable work continues on alterations to the premises and on new equipment.

An application for consent to establish the trade or business of "rag and bone dealer," as defined in the Manchester Order, 1921, was refused because of the unsuitability of the particular premises.

Proceedings pending from 1952 in respect of other premises at which rag and bone dealing was being carried on without the necessary consent of the Corporation were resolved on the cessation of the business.

Effluvium nuisances.

Inspections were made on complaints of effluvium nuisances involving both indoor and outdoor sources.

Nuisances from indoor sources generally, were speedily remedied because of the relative ease of discovery and removal of causes which included dead rats, defective drainage and faulty electric wiring affecting plastic fittings.

Nuisances from outdoor sources, often in the immediate vicinity of the complainants' premises, e.g., fumes from restaurant kitchens, usually were similarly readily remedied by securing proper disposal of the exhaust ventilation from the premises concerned, without the necessity for formal action.

Other outdoor sources of effluvia nuisance had more extensive implications associated with trade processes discharging fumes into the atmosphere in one instance from carbon disulphide by reason of a breakdown of a plant concerned. In this occurrence, the rather exceptional circumstances enabled prompt identification of the nature and source of the nuisance, the sanitary inspector and correspondingly prompt remedy. The Department is concerned, however, with complaints of pungent, though less odorous, generally intermittent emissions, the particular origins of which have not always been identifiable amongst numerous potential sources in the industrial areas concerned. In this regard, the Department maintains close contact with the Inspector of the Ministry of Housing and Local Government who is responsible for the administration of the Alkali, etc., Works Regulation Act, 1926.

Noise.

Complaints continued to be received alleging nuisance from noise from industrial, trade or other sources including dwelling houses.

It was evident, however, that the precise nature of the Department's responsibilities concerning a noise nuisance were not fully appreciated by some complainants. Thus, in accordance with the provisions of Section 40 of the Municipal Corporations Act, 1946, dealing with such a nuisance, it must be established that the noise is excessive, unreasonable or unnecessary and is injurious or dangerous to health. In addition, in respect of a noise nuisance from trade, business or occupation, a valid defence is available that the complainant has taken all practicable means to prevent or mitigate the nuisance or that, in regard to the cost and other relevant circumstances.

Most of the complaints were directed against noises occurring late at night or early in the morning and, whilst some arose from genuine annoyance, others were found to be more a matter of disputes between neighbours or public grievances. Otherwise, the investigations frequently necessitated repeated day and night visits by inspectors to determine whether the complaint required action by the Department or to check the outcome of undertakings given to deal with the noise sources.

When regard is had, however, to the density and pattern of the development of the City and the numerous points of potential irritation if not action, the over-all incidence of complaints was small. 42 different sources of noise were involved in complaints received and included dairy and bakery operations, various types of machinery, refrigerators, amplified music, electricity generators, and the loading and unloading of goods.

One rather unusual source of noise, affecting residents in the vicinity of works, was that of an experimental plant testing the suitability of different grades of conveyor belts with the object of manufacturing a belt of sufficient durability with an essential requirement that there should be an absolute minimum of heat production from friction. This involved prolonged continuous operation, day and night, under conditions simulating those for which the conveyor was intended and produced considerable noise which caused a nuisance. Informal representations, made by the inspector to the firm concerned, secured active co-operation and, although substantial alterations were required, these were carried out without delay and the nuisance abated.

2 instances where noise arising from amplified music and diesel electricity motors at fairs in close proximity to dwelling-houses caused a nuisance, necessary to serve abatement notices on the proprietors following which nuisance was abated. In another instance, 3 aggrieved householders were granted a Nuisance Order by the Magistrates' Court with a similar result.

used by pleasure fairs.

Following post-war experience of the use of unsuitable sites by pleasure fairs, especially in close proximity to dwellinghouses, e.g. on blitzed sites in certain parts of the City, discussion has continued between representatives of the Corporation and of the Showmen's Guild with the object of allowing certain parks or recreation grounds conditionally to be used by pleasure fairs, subject to members of the Guild not using sites elsewhere in the City without the consent of the Corporation.

As far as the Department is concerned, complaints as to some pleasure fairs on privately owned land have dealt in particular with excessive noise emanating into late hours of the night or until early morning. In 2 instances it was necessary for the Department to take statutory action under Part III of the Public Health Act, 1936, and Section 40 of the Manchester Corporation Act, 1946, in respect of noise nuisance as indicated elsewhere in this report.

Rag flock and other filling materials.

The experience of the Department in the operation of the Rag Flock and Filling Materials Act, and Regulations of 1951, requiring the use of clean filling materials in upholstered and other articles which are stuffed, demonstrated some enforcement weaknesses and suggested remedies were the subject of observations by the Town Clerk to the Association of Municipal Corporations during the year.

The proposals were not directed to alter existing policy expressed in the Act to enable it to be carried out more effectively and were adopted by the Corporation for submission to the Ministry of Housing and Local Government. The Corporation proposed 5 amendments, viz:

That giving a false warranty should be an offence;
That a person relying on the defence of warranty should be required to prove that he asked for clean material;

That there be no doubt as to whether the Local Authority has power to proceed against "some other person" after, having proceeded unsuccessfully against the original defendant, should be removed by clearly giving that person notice;

That a prosecutor should have the option of taking proceedings before a court having jurisdiction where the sample was taken and found not to be clean, or where the offence was committed; and that

That second-hand upholstered articles should be clearly marked "Second-hand."

That premises are registered under the requirements of the Act as being premises where designated filling materials are used in the manufacture of (59), upholstery (33), soft toys (7), cushions (2) and baby carriages (1). Registrations were made during the year.

That premises are now licensed for the storage of rag flock for distribution to other premises, the storage at one premises being discontinued during the year. There are no manufacturers of rag flock within the City.

363 visits were made to premises and 51 samples of designated materials were taken and submitted to prescribed analysts for examination in accordance with the Regulations. In 2 instances, involving straw and flock filling respectively, legal proceedings were instituted and fines of £3 and costs were imposed in each case. In a third case, dealing with filling found to contain an excess of "trash", proceedings are pending.

Legal proceedings were also instituted arising from a sample of taken during 1952 and found to contain an excess of "trash." The sample was fined £3 and costs.

The irregularity of a sample of feathers and another of cotton felt of minor nature and the firms concerned were cautioned.

Export of washed rags and second-hand clothing.

As a public health measure, most importing countries abroad now require certification of cleanliness before accepting second-hand and similar materials. It is customary for one of the following treatments to be applied according to the particular materials involved:—

- (a) washed and sterilised by boiling in caustic soda solution;
- (b) high pressure steam disinfection;
- (c) formalin disinfection;
- (d) soakage for 40 days in strong lime and sodium sulphide solution.

Inspections were made and certificates issued as follows:—

Articles	Bales or bundles	Countries
Washed rags	303	Venezuela
	106	S. Africa
	10	Canada
	10	Eire
	4	Aden
	45	Spain
	1	New Zealand
Second-hand clothing	17	Eire
	3	Turkey
	46	Rhodesia
	23	Hungary
	20	Greece
	1	Sierra Leone
	440	S. Africa
Picker waste (treated hides)	10 tons	Japan

Exchange of toys for rags.

The provisions of Section 154 of the Public Health Act, 1936, render collectors or dealers liable to proceedings if they sell or deliver articles of any age, or drink to any person, or any article whatsoever to a person under 16 years of age, whilst dealing or collecting rags or old clothes. This prohibition includes the exchange of toys for rags.

No contraventions of the Section were reported during the year.

Swimming baths.

There were 21 swimming baths in use in Manchester during 1953 and 16 of them were available for the general public, including 1 outdoor bath privately owned. Each is equipped with mechanical filtration and chlorination plant.

During the year the Corporation increased their number of pools in addition to 14, by re-opening 1 at Hulme.

The remaining indoor baths were maintained at the University, 2 schools, boys, a young men's physical training and recreational centre and a licensed establishment for massage or special treatment where swimming instruction is provided.

All the baths were visited to ensure that the recommended standards of the Ministry of Health relating to the cleanliness of the water were observed. Samples of the bath water were obtained, at each visit, for bacteriological examination and tests were made at the time of sampling to ascertain whether potential-hydrogen (pH) value and chlorine content were at a standard commensurate with effective filtration and sterilisation.

During the year, an investigation by the Public Health Laboratory Service with baths in the areas of different local authorities, including Manchester, which continuous filtration and chlorination plant was used, and a report issued on suitable standards for the bacteriological control of the bath water. It suggested that no sample should contain any coliform organisms in 100 ml. of water; in 75 per cent. of the samples, the plate count at 37°C. from 1 ml. of water should not exceed 10 colonies; and, in the remainder, 100 colonies should not be exceeded. Further, concerning the chlorination of the water, the report reaffirmed the earlier recommendation of the Ministry of Health that a residual of 0.2 to 0.5 p.p.m. of free residual chlorine should be secured to maintain the water in a bacteriologically satisfactory condition.

In assessing the efficiency of the treatment of swimming bath water in Manchester, the Department has previously applied such standards coupled with the pH value of the water, and the informed co-operation of the management concerned has been a major factor ensuring the efficient use of the facilities available to achieve these results.

There was only 1 adverse report on samples obtained by the Department in that instance a temporary mechanical failure of the plant was responsible. This was promptly remedied and an early revisit for repeat samples and tests was made under satisfactory conditions.

Establishments for massage or special treatment.

The Department continued to administer Part IX of the Manchester Licensing Act, 1924, and the byelaws made thereunder in 1925, which relate to the licensing and conduct of establishments for massage or special treatment in Manchester.

The treatment mainly afforded in such establishments is chiropody and, to a lesser degree, physiotherapy.

Generally, hospitals and establishments, where treatment is free, are excluded from the provisions of the Act.

There were 95 licences issued to carry on establishments for massage or special treatment in 1953, including 90 renewals and 1 transfer. The 4 new licences granted were for chiropody treatment only.

2 unlicensed chiropody establishments were found during the year. The persons concerned, when informed of the necessity for licensing, immediately made application. These, however, were refused by the Corporation as the applicants did not possess such technical qualifications as are considered reasonably necessary.

1 applicant appealed to a court of summary jurisdiction against the Corporation's decision but withdrew his appeal before the hearing.

Hairdressers or barbers.

655 persons and their premises where this trade or business is carried on are registered under the provisions of Section 42 of the Manchester Corporation Act, 1946, and byelaws are in operation concerned with the cleanliness of the persons employed, the equipment used and the premises.

The district sanitary inspectors regularly visit premises regarding requirements of the Act and byelaws and the majority of registered premises were found to be in a satisfactory condition whilst there was considerable improvement in the general standards of hygiene. It was necessary, however, to issue cautions regarding unsatisfactory repair, cleanliness and unhygienic practices in 25 instances. Satisfactory circumstances were reported on subsequent visits and in no case was it necessary to institute legal proceedings.

Following verbal cautions to several unregistered persons carrying on hairdressing business on unregistered premises, applications for registration were received. Byelaw standards and requirements were being observed in each case, but where the business was being conducted in dwelling houses circumstances were reported to the Town Planning Section of the Surveyor's Department and also to the Director of Housing when new houses were concerned.

Sale of certain poisons.

The retail sale of poisons by traders who are not registered pharmacists is controlled by the Pharmacy and Poisons Act, 1933, and the Poisons Act, 1946. A poisons list has been prepared and confirmed by the Home Secretary. The list is in two parts. The Part II list prescribes the poisons which may be sold by ordinary traders in addition to pharmacists.

Persons who sell Part II poisons are required to make application to the Corporation to be entered on a list of persons entitled to sell such poisons and to comply with the provisions of the Act and rules.

The number of sellers of Part II poisons on the list for the year 1946 was a reduction of 54 as compared with the previous year. This total included 180 new retailers, 234 listed persons having discontinued the sale of poisons. Listing and renewal fees amounted to £328 11s. 0d.

The Part II poisons are mainly disinfectants and their compounds, insecticides, fungicides, rodenticides, household cleaning agents, hairdressing preparations, and others sold chiefly at grocers, hardware dealers, seedsmen, agricultural chemists, florists, herbalists and hairdressers. Certain of the poisons (specified in the schedule of the Poisons Rules) such as arsenical compounds, nicotine, and mercuric chloride, because of their more dangerous nature are subject to more strict control. These poisons are limited as to the form in which they may be sold by an ordinary trader and they may only be sold by the licenced trader or a named deputy. Prescribed records must be kept of all these sales, including particulars of the person purchasing and of the purpose for which the poisons are purchased.

the general requirements to be observed in connection with the sale of poisons are supervised by the district sanitary inspectors, particular attention being directed to the keeping of prescribed records as to sales, packing, storage facilities and types of containers used. During the year, it was necessary to caution 13 retailers selling Part II poisons without complying with formalities required.

mortuaries.

There are 4 public mortuaries and associated post-mortem rooms are under the supervision of the Watch Committee and, with the co-operation of the Constable, a survey was made of the facilities and structural arrangements with special regard to the maintenance of hygienic conditions.

Resulting from the investigations, works of improvement, directed to items such as new equipment, hot and cold water supply, drainage and ventilation, have been undertaken.

exhumations.

With the object of ensuring that due care and attention to public health and decency were observed as required by licences issued by the Home Office in connection with the exhumation of human remains, district sanitary inspectors attended 12 exhumations. In 4 instances the remains were immediately re-interred in the same cemeteries, whilst in the other instance they were transferred to another cemetery outside the City.

In addition, arising from re-development of land containing a disused burial ground, similar attendances were made in connection with the exhumation and re-interment of remains of 40 persons and re-interment in another cemetery.

PUBLIC CONVENIENCES.

The following public conveniences under the control of the Health Committee at the end of the year numbered 158 and provide the following accommodation:

with urinal, watercloset, washing and parcel storage accommodation	5
with urinal, watercloset and washing accommodation	10
with urinal and watercloset accommodation	39
with urinal accommodation	61
	<hr/>
	115

with watercloset, washing and parcel storage accommodation	4
with watercloset and washing accommodation	6
with watercloset accommodation	33
	<hr/>
	43

Of the public conveniences with watercloset accommodation, 1 compartment is free of charge.

A new public convenience for females in Cannon Street was opened to the public in July, 1953, and new public conveniences for both sexes have been in use at Cannon Street, East Didsbury, since July, 1953. A pleasing feature has been the small amount of wanton damage at this convenience which is in contrast to the misuse which persisted at numerous suburban public conveniences.

11 suburban conveniences suffered misuse and damage which, at the cost of repairs involved, also, frequently deprived the public of the use until the work could be carried out. Some of the damage resulted from attempts to steal washbasins, whilst it does seem that another cause of damage to washbasins was that of youths climbing on to them. It has been impossible to cope with the theft of plugs and chains from washbowls and the purchase of paper towels and liquid soap has had to be discontinued because of

The building work on the new conveniences at Ashton Old Road, Ogden Lane, Higher Openshaw, has proceeded, but there was delay in the work at Mundy Street, Stockport Road, Longsight, pending special consideration of the particular circumstances.

At Kingsway-Mauldeth Road, Burnage, a site was obtained for the provision of conveniences for both sexes of similar design to those at East Didsbury, the building work is due to be commenced in 1954.

The Committee's proposal to provide facilities in Burton Road, Winton, has been delayed because of protracted negotiations regarding the site, an early start is anticipated.

The need to increase the conveniences at Piccadilly has again received the attention of the Committee and financial provision has been included in the estimates for the year 1954-55 with a view to undertaking the work.

A mobile steam cleaner, which has been obtained for the cleaning of the conveniences, has proved very effective in attaining a higher standard of cleanliness by using steam under pressure than hitherto secured by hand cleaning and hosing with cold water.

Urinals at the following locations have been modernised:

- Adjoining 915 Ashton Old Road, Openshaw.
- Adjoining Crown Hotel, Fairfield Street, Ardwick.
- Adjoining Didsbury Hotel.
- Adjoining Wellington Hotel, Didsbury.
- St. Saviours, Plymouth Grove, Chorlton-on-Medlock.
- Pollard Street, Ancoats.

The following urinals, which were of an obsolete type, had become redundant and have been closed:

- Clayton Lane South, Openshaw.
- On Canal Bridge, Union Street, Ancoats.

REPORT OF THE PUBLIC ANALYST.

A. N. Leather, B.Sc., F.R.I.C.

The presentation of another annual report gives me an opportunity, which I am very glad to take, of expressing my appreciation of the loyal services of the laboratory staff, and of thanking sampling officers and other members of the staff of the Health Department for their willing co-operation.

During the year, Food Standards Orders in respect of preserves, ice cream and saccharin tablets were varied. The Public Health (Preservatives, etc., in Food) Order was amended by extending the schedule of foods in which preservatives are permitted. A new Order, the Artificial Sweeteners in Food, forbids the use of substances other than saccharin.

The Ministry of Food discontinued the Advisory Service which had been established within the framework of the Food Standards and Labelling Division of the Ministry, and during the year it became evident that the Food and Drug Authorities (such as Manchester), who already had the responsibility for enforcing the Labelling of Food Order, would also find themselves called upon to advise and act as advisers to assist labellers in complying with the requirements of the Order.

During the year's total of samples submitted under the Food and Drugs Act and related Acts and Regulations, the proportion of samples found to be unsatisfactory was 6.1 per cent. In this connection "unsatisfactory" means "adulterated or otherwise giving rise to irregularity." Later in this report some comments are made on the meaning of adulteration statistics.

The notes recording the action taken on unsatisfactory samples are based on the information provided by the Sanitary Services Division of the Department.

In Table 1 are set out the samples examined under the Food and Drugs Act and related Acts and Regulations, and those found to be unsatisfactory. Tables 2 and 3 give the average composition of milk for the four quarters and for the whole year.

TABLE 1.

Food and Drugs Act, 1938.

Summary of samples examined.

Article	Number examined				Number adulterated or otherwise giving rise to irregularity		
	Formal	Informal	Private	Total	Formal	Informal	Private
Milk*	689	629	—	1,318	143	47	—
Milk (sterilised)	143	40	—	183	—	—	—
Ice cream	23	10	—	33	—	—	—
Ice-lollies	—	36	—	36	—	—	—
Ice-lolly syrups	—	9	—	9	—	—	—
Alcoholic liquids—spirits	19	—	—	19	—	—	—
wine cocktails	5	—	—	5	—	—	—
wines	12	—	—	12	—	—	—
others	17	34	—	51	—	—	—
Arrowroot	—	2	—	2	—	—	—
Bacon and ham	30	—	—	30	—	—	—
Baking and golden raising powder	—	16	—	16	—	—	—
Barley	22	—	—	22	—	—	—
Batter mixture	—	2	—	2	—	—	—
Biscuits	38	2	—	40	—	—	—
Blancmange powder	—	7	—	7	—	—	—
Bottled:—							
Beetroot	1	—	—	1	—	—	—
Fish	—	2	—	2	—	—	—
Fruit	—	3	—	3	—	—	—
Fruit juice	—	1	—	1	—	—	—
Mint jelly	—	1	—	1	—	1	—
Bread	24	12	—	36	—	2	—
Butter	37	—	—	37	—	—	—
Cake and pudding mixtures	—	20	—	20	—	2	—
Calves foot jelly	—	2	—	2	—	—	—
Canned:—							
Cream	—	10	—	10	—	2	—
Creamed rice	—	1	—	1	—	—	—
Fish	—	7	—	7	—	—	—
Fruit and fruit juice	—	9	—	9	—	—	—
Meat and meat products	—	14	—	14	—	—	—
Soup	—	20	—	20	—	—	—
Vegetables	—	36	—	36	—	—	—
Celery salt	—	4	—	4	—	—	—
Cereals (prepared)	32	1	—	33	—	—	—
Cheese	9	25	1	35	—	1	—
Chocolate spread	—	3	—	3	—	—	—
Christmas pudding	—	5	—	5	—	1	—
Cocoa	26	1	—	27	—	—	—
Coconut, desiccated	16	—	—	16	—	—	—
Coffee	34	1	—	35	—	—	—
Coffee and chicory	6	3	—	9	—	—	—
Coffee and chicory essence	—	13	—	13	—	—	—
Coffee extract (dry)	2	4	—	6	—	—	—
Cornflour	16	1	—	17	—	—	—
Custard powder	25	1	—	26	—	—	—
Dried cereal soup mixture	—	2	—	2	—	2	—
Dried fruits:—							
Vine fruits	47	—	—	47	—	—	—
Others	9	7	—	16	—	—	—
Dried herbs	—	10	—	10	—	—	—
Dried pulses	66	1	—	67	1	—	—
Dried soup	—	5	—	5	—	1	—
Dried yeast	—	2	—	2	—	—	—
Dripping	4	2	—	6	—	—	—
Energy food	—	1	—	1	—	1	—
Fish cakes	—	1	—	1	—	—	—
Fish dressing	2	3	—	5	—	—	—
Fish paste	2	2	—	4	—	—	—
Fish (prepared)	—	4	—	4	—	—	—
Flavouring	—	3	—	3	—	—	—
Flour confectionery	30	9	—	39	—	—	—
Flour, plain	13	—	—	13	—	—	—
Flour, self raising	35	—	—	35	—	—	—
Food beverage powder	4	3	—	7	—	—	—
Fruit juice	—	3	—	3	—	—	—
Gelatine	1	4	—	5	—	—	—
Golden syrup and treacle	—	18	—	18	—	—	—
Gravy browning	—	15	—	15	—	—	—
Gravy powder and gravy salt	—	10	—	10	—	—	—
Ground almonds	3	2	—	5	—	—	—
Ground mixed nuts	—	1	—	1	—	—	—

Article	Numbers examined				Numbers adulterated or otherwise giving rise to irregularity				Percentage of Samples unsatisfactory
	Formal	Informal	Private	Total	Formal	Informal	Private	Total	
.....	9	1	—	10	—	—	—	—	—
.....	5	10	—	15	—	—	—	—	—
preparations)	7	22	—	29	—	1	—	1	3.4
.....	—	2	—	2	—	—	—	—	—
.....	—	1	—	1	—	—	—	—	—
ing fat	36	1	—	37	—	—	—	—	—
chetti and vermicelli	16	—	—	16	—	—	—	—	—
.....	35	1	—	36	—	—	—	—	—
.....	—	5	—	5	—	—	—	—	—
prepared meat	18	—	—	18	1	—	—	1	5.6
.....	—	4	—	4	—	—	—	—	—
.....	—	9	—	9	—	—	—	—	—
cooked sausage	10	—	—	10	1	—	—	1	10
.....	16	1	—	17	2	—	—	2	12
ls, etc.)	29	—	—	29	—	—	—	—	—
d	—	28	—	28	—	—	—	—	—
.....	—	3	—	3	—	—	—	—	—
d	—	5	—	5	—	—	—	—	—
der	—	2	—	2	—	—	—	—	—
ndiment	—	9	—	9	—	—	—	—	—
.....	—	4	—	4	—	—	—	—	—
.....	10	1	—	11	—	—	—	—	—
.....	—	1	—	1	—	—	—	—	—
.....	—	5	—	5	—	—	—	—	—
.....	39	6	—	45	1	—	—	1	2.2
.....	—	5	—	5	—	1	—	1	20
.....	175	3	—	178	2	—	—	2	1.1
.....	43	—	—	43	—	—	—	—	—
s	—	1	—	1	—	—	—	—	—
.....	12	—	—	12	—	—	—	—	—
mayonnaise	—	14	—	14	—	—	—	—	—
.....	—	9	—	9	—	—	—	—	—
.....	—	1	—	1	—	—	—	—	—
n tomato)	1	33	—	34	—	1	—	1	2.9
.....	—	9	—	9	—	—	—	—	—
.....	16	—	—	16	—	—	—	—	—
der	1	2	—	3	—	—	—	—	—
.....	38	33	—	71	—	—	—	—	—
.....	7	42	—	49	1	2	—	3	6.1
.....	2	9	—	11	—	—	—	—	—
.....	22	—	—	22	1	—	—	1	4.5
nffectionery)	50	1	—	51	—	—	—	—	—
.....	33	3	—	36	—	3	—	3	8.3
.....	9	—	—	9	—	—	—	—	—
.....	42	—	—	42	—	—	—	—	—
owder	43	3	—	46	—	—	—	—	—
.....	—	1	—	1	—	—	—	—	—
foods*	2,166	1,385	1	3,552	153	68	—	221	6.2

Article	Number examined				Number adulterated or otherwise giving rise to irregularity			
	Formal	Informal	Private	Total	Formal	Informal	Private	Total
Aspirin tablets	3	2	—	5	—	—	—	—
Bicarbonate of soda	—	3	—	3	—	—	—	—
Boric acid	—	1	—	1	—	—	—	—
Borax	—	1	—	1	—	—	—	—
Calamine lotion	—	1	—	1	—	—	—	—
Cascara sagrada tablets	—	—	—	—	—	—	—	—
Compound codeine tablets	—	1	—	1	—	—	—	—
Compound tincture of rhubarb	1	—	—	1	—	—	—	—
Cough mixture	—	7	—	7	—	—	—	—
Cream of tartar	—	1	—	1	—	—	—	—
Epsom salts	—	2	—	4	—	—	—	—
Flowers of sulphur	—	1	—	1	—	—	—	—
Friar's balsam	—	1	—	1	—	—	—	—
Glauber's salt	3	—	—	3	—	—	—	—
Glucose beverage	1	1	—	2	—	—	—	—
Glucose with vitamin D	1	2	—	3	—	1	—	—
Glycerine	4	1	—	5	—	—	—	—
Glycerine lemon and ipecac mixture	—	1	—	1	—	—	—	—
Halibut oil and orange	—	1	—	1	—	—	—	—
Indigestion powder	—	1	—	1	—	—	—	—
Liquid extract of cascara sagrada	—	1	—	1	—	—	—	—
Liquid paraffin	3	1	—	4	—	—	—	—
Malt extract with cod liver oil	—	1	—	1	—	—	—	—
Medicated lozenges	—	1	—	1	—	1	—	—
Milk of magnesia tablets	—	2	—	2	—	—	—	—
Oil:—								
Camphorated	2	1	—	3	—	—	—	—
Castor	2	—	—	2	—	—	—	—
Neatsfoot	—	1	—	1	—	—	—	—
Olive	4	2	—	6	—	—	—	—
Olive oil and raspberry vinegar	—	2	—	2	—	—	—	—
Parrish's Chemical Food	—	1	—	1	—	—	—	—
Rose hip and orange syrup	—	2	—	2	—	—	—	—
Saline, effervescent	—	1	—	1	—	—	—	—
Sulphur and lime tablets	—	1	—	1	—	—	—	—
Syrup of squills	2	—	—	2	—	—	—	—
Tincture of iodine	—	1	—	1	—	—	—	—
Total drugs	29	46	—	75	—	2	—	—
Add total foods*	2,166	1,385	1	3,552	153	68	—	2
Total food and drugs*	2,195	1,431	1	3,627	153	70	—	2
A milk (including sterilised milk)*	832	669	—	1,501	143	47	—	1

* Not including 17 " appeal to cow " samples of milk.

TABLE 2.
Composition of milk.

Quarterly average table.

Quarter	All milks				Genuine milks				Adulterated milk		
	No.	Non-fatty solids %	Fat %	Total solids %	No.	Non-fatty solids %	Fat %	Total solids %	No.	Non-fatty solids %	Fat %
First	368	8.58	3.28	11.86	290	8.69	3.39	12.08	78	8.17	2.87
Second	346	8.70	3.24	11.94	295	8.74	3.32	12.06	51	8.48	2.82
Third	409	8.78	3.52	12.30	362	8.81	3.61	12.42	47	8.57	2.78
Fourth	378	8.84	3.76	12.60	364	8.86	3.79	12.65	14	8.21	2.92

TABLE 3.
Composition of milk.

average table.

All milks -				Genuine milks				Adulterated milks			
No.	Non-fatty solids %	Fat %	Total solids %	No.	Non-fatty solids %	Fat %	Total solids %	No.	Non-fatty solids %	Fat %	Total solids %
1,501	8.73	3.46	12.19	1,311	8.78	3.55	12.33	190	8.36	2.84	11.20

Adulteration of milk.

its for the composition of milk are fixed by the Sale of Milk Regulations, under powers conferred by the Food and Drugs Act, 1938. The effects Regulations include the following: (a) when a sample of milk is found to contain less than 8.5 per cent. of non-fatty solids the presumption is raised that the contrary is proved that water has been added to the milk; (b) when a sample of milk is found to contain less than 3.0 per cent. of fat the presumption is raised until the contrary is proved that fat has been abstracted (or that water has been added).

Generally speaking, any sample falling to comply with these minimum requirements is returned as "adulterated or otherwise giving rise to irregularity". Where practicable the Hortvet freezing-point test is applied to samples of milk showing non-fatty solids below 8.5 per cent. If such a sample is found to have a freezing-point not nearer to zero Centigrade (the freezing-point of pure water is -0.529°C . (which is regarded as the limiting value for genuine milk) is reported as genuine, apart from any deficiency in fat. Such samples are listed in Table 4. Any sample listed in Table 4 is, however, returned as "adulterated or otherwise giving rise to irregularity" if it has a fat content of less than 3.0 per cent.

It is again clear from the experience of this laboratory that the freezing-point test more often acts as a protection to an innocent vendor of poor milk than might at first sight be "presumed" to contain added water, than as a means of confirming the presence of extraneous water in other samples where the presence of extraneous water is independently indicated by full analysis in comparison with "appeal to cow" samples.

It can be seen from Table 1 that 1,318 samples of milk (excluding sterilised milk) were examined during the year. Of 287 samples submitted under the Milk and Dairies Regulations, and included in the above, only two were adversely reported upon; one containing 5.8 per cent of added water and the other containing a faint chlorine-like taint. In addition, 183 samples of sterilised milk were examined, each of which was found to be genuine.

The total number of milks received was 1,501 (excluding "appeal to cow" samples), and 190 (or 12.6 per cent) of these were adversely reported upon.

Of these 190 samples, 64 contained added water, varying from a trace to 12.6 per cent, and 19 of these same 64 samples were also deficient in fat.

Of the 126 samples which were deficient in fat only, the deficiency varying from 1.6 per cent to 3.3 per cent, expressed as a percentage of the 3.0 per cent. presumptive minimum.

Before a final interpretation can be placed upon the figure of 12·6 per cent as representing the level of milk adulteration for the year, account should be taken of the number of consignments of milk involved, and in the case of deficiency the average composition of individual consignments. Thus the samples containing added water were contained in 24 consignments, one of which consisted of 15 churns. The 125 samples deficient in fat were contained in 82 consignments, yet 58 of these consignments contained an average over percentage of fat of 3·0 per cent or more. Thus, for example, the consignment which included the churn with a 33·3 per cent fat deficiency had an average content of 3·13 per cent calculated on the whole consignment.

[In respect of 35 samples of milk summonses were issued, magistrates inflicted penalties in every instance. Fines totalled £109 with £19 2s. 7d. costs. In other appropriate cases cautions were administered.]

17 "appeal to cow" samples were examined during the year. Three of these samples (from different sources) contained less than 8·5 per cent non-fatty solids, the amounts being respectively 8·45, 8·35 and 8·33 per cent. The first and third of these samples had freezing-points indicative of genuine milk, and they appear at the foot of Table 4. The second sample, however, had a freezing-point of $-0\cdot524^{\circ}\text{C}$. (Hortvet) indicating the presence of added water. On enquiry it was learned that milking had commenced before the arrival of the sampling officer. A further "appeal" sample from the same herd three days later had a freezing-point of $-0\cdot545^{\circ}\text{C}$. (Hortvet), a result within the normal range for genuine milk. Incidentally this further "appeal" sample was found to contain more than 8·5 per cent of non-fatty solids.

TABLE 4

The following samples of milk showed figures for non-fatty solids below the presumptive limit of 8·5 per cent non-fatty solids fixed by the Sale of Milk Regulations, 1939, but were adjudged genuine (apart from any deficiency in fat) on the Hortvet freezing-point test:—

Serial Number	Total solids per cent.	Fat per cent.	Non-fatty solids per cent.	Freezing point $^{\circ}\text{C}$. (Hortvet)	Acidity $^{\circ}\text{Richmond}$
502B	11·42	3·00	8·42	$-0\cdot545$	16
1011c	10·97	2·55	8·42	$-0\cdot534$	16
8A	11·38	3·05	8·33	$-0\cdot547$	16
62A	11·32	3·10	8·22	$-0\cdot535$	16
64A	11·21	3·00	8·21	$-0\cdot539$	17
565B	11·06	2·70	8·36	$-0\cdot540$	16
566B	10·98	2·60	8·38	$-0\cdot540$	17
567B	11·12	2·80	8·32	$-0\cdot539$	17
80A	11·64	3·45	8·19	$-0\cdot529$	14
84A	10·95	2·90	8·05	$-0\cdot532$	14
85A	11·37	3·05	8·32	$-0\cdot533$	16
86A	11·38	2·95	8·43	$-0\cdot541$	16
146A	11·01	2·70	8·31	$-0\cdot546$	15
657B	11·49	3·00	8·49	$-0\cdot545$	16
658B	11·32	2·85	8·47	$-0\cdot549$	15
165A	11·44	3·00	8·44	$-0\cdot533$	16
166A	11·14	2·75	8·39	$-0\cdot543$	16
167A	11·28	2·90	8·38	$-0\cdot542$	16
191A	11·90	3·60	8·30	$-0\cdot552$	17
192A	10·83	2·70	8·13	$-0\cdot553$	15
1163c	11·20	2·80	8·40	$-0\cdot539$	16
1164c	10·92	2·60	8·32	$-0\cdot541$	16
1165c	10·85	2·50	8·35	$-0\cdot539$	16
1167c	10·89	2·50	8·39	$-0\cdot540$	16
694B	11·32	3·10	8·22	$-0\cdot540$	16
217A	11·09	2·95	8·14	$-0\cdot547$	17
219A	11·14	3·05	8·09	$-0\cdot537$	16
220A	10·90	2·65	8·25	$-0\cdot546$	17
221A	11·46	3·25	8·21	$-0\cdot538$	17
222A	10·96	2·80	8·16	$-0\cdot535$	15
241A	12·33	4·00	8·38	$-0\cdot535$	14
242A	10·82	2·55	8·27	$-0\cdot537$	16
244A	10·72	2·35	8·37	$-0\cdot543$	14
245A	10·82	2·55	8·27	$-0\cdot541$	16

	Total solids per cent.	Fat per cent.	Non-fatty solids per cent.	Freezing point °C. (Hortvet)	Acidity °Richmond
	11·10	2·85	8·25	—0·545	17
	11·18	2·70	8·48	—0·533	17
	10·67	2·45	8·22	—0·536	17
	10·44	2·40	8·04	—0·537	17
	10·47	2·15	8·32	—0·538	18
	10·58	2·40	8·18	—0·536	17
	11·59	3·25	8·34	—0·545	17
	11·59	3·15	8·44	—0·532	17
	12·04	3·75	8·29	—0·541	17
	11·10	2·95	8·15	—0·539	17
	11·42	3·00	8·42	—0·546	18
	11·57	3·20	8·37	—0·532	17
	11·83	3·45	8·38	—0·539	15
	11·29	3·15	8·14	—0·541	15
	11·09	3·10	7·99	—0·534	16
	10·83	2·70	8·13	—0·539	16
	10·56	2·55	8·01	—0·529	15
	11·73	3·30	8·43	—0·548	16
	11·95	3·65	8·30	—0·541	14
	11·24	3·00	8·24	—0·543	15
	11·24	3·10	8·14	—0·540	15
	11·18	3·05	8·13	—0·541	14
	10·90	2·85	8·05	—0·540	15
	10·74	2·80	7·94	—0·539	15
	11·33	3·00	8·33	—0·535	16
	11·13	2·90	8·23	—0·531	16
	11·66	3·30	8·36	—0·548	16
	11·64	3·40	8·24	—0·548	17
	10·92	2·65	8·27	—0·541	16
	11·52	3·20	8·32	—0·542	16
	11·13	2·75	8·38	—0·541	17
	12·02	3·65	8·37	—0·542	16
	10·93	2·45	8·48	—0·542	16
	10·76	2·55	8·21	—0·541	16
	11·08	2·60	8·48	—0·543	17
	11·35	3·10	8·25	—0·536	16
	10·84	2·40	8·44	—0·534	17
	11·03	2·65	8·38	—0·535	17
	11·00	2·65	8·35	—0·536	17
	10·77	2·60	8·17	—0·545	17
	11·25	3·15	8·10	—0·531	17
	11·63	3·15	8·48	—0·542	16
	11·29	2·90	8·39	—0·540	17
	10·51	2·50	8·01	—0·537	14
	11·32	3·05	8·27	—0·557	17
	11·73	3·40	8·33	—0·556	18
	10·47	2·40	8·07	—0·539	15
	11·32	2·90	8·42	—0·541	16
	12·58	4·25	8·33	—0·548	17
	12·64	4·35	8·29	—0·548	16
	11·26	2·90	8·36	—0·538	16
	11·50	3·25	8·25	—0·536	16
	11·60	3·20	8·40	—0·533	17
	12·38	3·90	8·48	—0·544	16
	11·26	2·85	8·41	—0·539	16
	11·06	2·60	8·46	—0·542	15
	10·66	2·40	8·26	—0·542	14
	11·36	2·90	8·46	—0·548	16
	11·93	3·50	8·43	—0·554	16
	11·29	2·80	8·49	—0·547	15
	10·75	2·50	8·25	—0·548	15
	11·42	3·40	8·02	—0·547	17
	12·26	4·05	8·21	—0·543	16
	11·46	3·30	8·16	—0·538	15
	12·40	4·00	8·40	—0·541	18
	11·27	2·85	8·42	—0·540	17
	12·46	4·15	8·31	—0·545	16
	11·20	2·90	8·30	—0·539	17
	11·67	3·35	8·32	—0·539	16
	11·40	3·15	8·25	—0·540	16
	11·14	2·70	8·44	—0·556	18
	10·75	2·75	8·00	—0·537	17
	11·20	2·85	8·35	—0·535	17
	11·20	2·90	8·30	—0·542	17
	11·48	3·20	8·28	—0·541	17
ow" samples:					
	11·31	2·86	8·45	—0·540	16
	12·05	3·72	8·33	—0·549	16

Adulteration of samples other than milk.

Table 5 are set out other samples of food and drugs found to be adulterated satisfactory, and any subsequent action taken in respect of such samples. In the table are detailed notes on matters of interest arising from the analysis of these samples.

TABLE 5.
Samples other than milk.
Adulterated and other unsatisfactory samples and action taken.

Informal samples										Formal samples										
Adulterated or unsatisfactory	Cautioned	Further samples taken or being sought	Irregularity deemed too slight for further action	Referred to Weights and Measures Department	Referred to M.O.H. of local authority	Dealt with under Unsound Food Clauses	Irregularity deemed to be accidental	Article		Adulterated or unsatisfactory	Cautioned	Legal proceedings ordered	Referred to M.O.H. of local authority	Further sample taken	Withdrawn from stock	Summoned	Fined	Amount of fines	Amount of costs	
																		£	s.	d.
1	1								Bottled mint jelly											
2	2								Bread											
2		1							Cake mixtures											
2		1							Canned cream											
1		1							Cheese											
1	1								Christmas pudding											
2	2								Christmas pudding mixture											
									Dried cereal soup											
									Dried pulses											
									Dried soup											
									Energy food											
									Jelly crystals											
									Meat products			2						20	0	0
									Pickles											
									Portato crisps											
									Preserves											
									Sauce											
									Spices											
									Suet, shredded											
									Sugar confectionery											
									Glucose and vitamin D Medicated lozenges											

Some notes on particular cases of adulteration or irregularity.

Bottled mint jelly (informal). This sample was submitted in the manufacturer's original container, a glass jar bearing a printed label. The wording on label included the following:— "Mint jelly. Made from mint, sugar, in, Orleans wine vinegar, colouring." The product consisted of a pale transparent jelly speckled with small pieces of mint. On analysis the following results were obtained:—Sugars 51.2 per cent; acetic acid 1.4 per cent (equivalent to vinegar about 30 per cent); pectin 0.8 per cent; dried mint leaves 0.3 per cent (equivalent to fresh mint roughly 2 per cent). To comply with the Labelling of Food Order, 1953 (or its predecessors) it would be necessary to declare the ingredients "in the order of the proportion in which they were used, the ingredient used in the greatest proportion (by weight) being specified first". It appears therefore that the declaration of ingredients should be in the following order:—Sugar, wine vinegar, pectin, mint, colouring. Or alternatively, if the product is made from fresh mint:—Sugar, wine vinegar, mint, pectin, colouring.

[The packers were advised to comply with the Labelling of Food Order, and requested to submit a specimen of an amended label.]

Bread (informal complaint). A sample was submitted by a sampling officer who was investigating a private purchaser's complaint that a foreign wire had been found in the bread. As submitted the sample consisted of a portion of a small white loaf. Embedded in the cut surface of the loaf (that is, say, in the "crumb" of the loaf) was a twisted and bent piece of iron wire about $\frac{1}{2}$ inch long. From the local staining in the loaf and from the rust-stained crumb on the metal, it was clear that the wire had been present in the loaf at the time of baking. Both ends of the wire had a broken surface, and the wire looked like a portion of a nail, or wire-staple, with both ends bent.

[An investigation was made at the bakery and effective precautions were adopted to prevent recurrence.]

Home-baked bread (informal complaint.) This sample, submitted to investigate a private purchaser's complaint, consisted of about two-thirds of a loaf. The cut surface revealed a mark or spot, somewhat moist and hollow in the centre, which was whitish and was surrounded by a zone in which the colour of the bread was seen to be stained an orange-yellow colour when compared with the rest of the cut surface. The stain penetrated about an inch into the interior portion of the loaf. The whole of the stained portion of the bread was removed and was found to weigh 3.7 grammes (about $\frac{1}{8}$ oz.). The weight of the whole sample was about 16 oz. On analysis the stained portion was found to contain an abnormally high proportion of carbonate of sodium, namely 4.4 per cent as Na_2CO_3 . Crumbs of this portion tasted of "soda". The stain could be imitated by allowing drops of sodium carbonate solution to soak into a slice from the unstained portions of the loaf. The origin of the spot was probably a small lump of bicarbonate of soda which had escaped being rubbed down during kneading and had gone into solution in the hot moist dough during baking. The estimated original weight of the lump was 0.25 gramme (about 4 grains). In an isolated instance this might be considered as not being harmful, though the sample was unsuitable for consumption by reason of a gross and obvious defect in quality.

[The circumstances were investigated at the bakery and precautions to prevent a recurrence were recommended.]

Sweetened cake mixture (two informal samples). The second sample procured to provide more material for analysis. Both samples were submitted in the packers' original cartons bearing printed matter including the following:— "Ingredients: M. flour, sugar, edible starch, baking powder, glucose, flavouring, sodium alginate, calcium alginate, glycerine, benzoic colouring." The cartons each contained a flour mixture in a paper bag inside a transparent plastic envelope containing semi-transparent jelly-like rosette masses about $\frac{1}{2}$ inch in diameter (cake decorations). A careful search was made for benzoic acid which was declared as an ingredient and benzoic acid, if any, was found to be present in a proportion less than thirty parts per million either in the flour mixture or in the decorations. It would be a breach of the Public Health (Preservatives, etc., in Foods) Regulations, 1925, to add benzoic acid to a sweetened flour mixture or to a cake decoration. On the other hand, if no benzoic acid is present, there appears to be a breach of the Labelling of Food Order, 1953, which requires "a true statement . . ." of the ingredients. (The predecessor of the 1953 Order, namely the Labelling of Food Order, 1950, contained the same requirement.)

[The manufacturer was asked for an explanation and reminded of the requirements of the Labelling of Food Order and of the Preservatives Regulations.]

Canned cream (two informal samples). These independent samples consisted of unopened cans of different brands of canned sterilised cream. They were found to contain less than the stated weight of cream. The composition of the cream was satisfactory.

[The facts were reported to the Weights and Measures Department and it was found that, generally speaking, the net weights of the contents of a number of cans, considered as a whole, were satisfactory.]

Cheese (cheese-spread, informal). The sample was contained in a paper bag bearing printed matter. It appeared to be a Danish product but the wording on the carton was in English, and included the words: "Fat 45% of the dry solids." On analysis the sample was found to contain only 32.5 per cent of fat, expressed as a proportion of the dry solids. Thus, on comparison with the wording on the carton, there was found to be a deficiency amounting to 27 per cent of the declared proportion of fat.

[A formal sample was requested, but the product was not obtainable.]

Christmas pudding (informal). It appears from the Labelling of Food Order, 1953, that Christmas pudding should bear a label stating the ingredients in appropriate order (i.e. in order of proportion by weight, the ingredient in greatest proportion being specified first). This follows from the fact that though flour confectionery is exempted from all the provisions of the Order, the definition of "flour confectionery" in the Order, while including flour-made puddings, specifically excludes Christmas puddings.

The above sample was wrapped in a cellophane packet and bore a paper label with wording including the following: "Ingredients: vine fruits, spices, sugar, flour, fat, peel, rusk, salt," and the makers' name and address. The following analytical results were obtained:—Water 20 per cent; fat 10 per cent; sucrose 7 per cent; reducing sugar as invert 44 per cent. Some of the reducing sugar may have been formed from sucrose during cooking and thus less than may appear in the analysis than was actually present in the raw material. The remainder of the reducing sugar would be dextrose derived from vine fruits, which may contain about 60 per cent of dextrose. It is impossible by analysis to find

ion the proportion of vine fruits in a cooked pudding. The results of examination are mainly consistent with the statement of ingredients, but one notable exception—"spices" should appear near the end of the list, probably between "rusk" and "salt." The Labelling of Food Order does not allow the declaration of fat simply as "fat"; either the fatty ingredient should be named as lard, margarine, etc., or it should be declared as provided in the First Schedule of the Order, Item 3) as "edible fat." Further, the item "peel" should be expanded at least to "citrus peel".

[The attention of the packers was drawn to the requirements of the Labelling of Food Order, and they undertook to comply with the Order in future.]

Cereal soup mixture (two informal samples). A sample was submitted in the packers' original container, a cellophane packet. On examination the contents were seen to consist of white beans, whole peas, split peas, lentils, barley, and fine tapioca. In general the contents were clean and of good appearance. In one place, however, a small mass of the ingredients was found adherent and was seen to be held together by insect threads. There was also the characteristic webbing with excreta, and a small dead grub, nearly as long in the dried condition, was found. This grub must have been alive at the time of the mixing of the ingredients, and probably after packing in the cellophane packet. Dried pulses and cereals are liable to attack by moth-larvae. The present instance is an example of almost the minimal observable attack and an individual grub might have little significance. On the other hand, it might be a sign of perhaps more serious infestation at some stage in the preparation of the product. Because the labelling was considered unsatisfactory, a second sample of the same product was requested and was submitted in the packers' cellophane packet unopened. Printed matter rendered the greater part of the cellophane quite opaque, but the contents could be seen through a hole about $\frac{1}{2}$ in. wide running round the packet. The printed wording was as follows: "Cereal Soup Mixture, 8 oz. net, foreign produce," followed by the name and address of the packers. There was no declaration of ingredients.

On examination the net weight of the contents was found to be 8 oz. The packet was found to contain the following constituent parts in the following order:—Dried peas, barley, yellow split peas, rice, green split peas, dried beans, lentils, tapioca (small pellets). To comply with the Labelling of Food Order, the printed matter upon the packet would have to include a declaration at least to the following effect:—Ingredients: dried pulses, cereals, etc.

[No further signs of infestation were observed on visiting the shop or factory. The packers undertook to comply with the Labelling of Food Order.]

Dried pulses (dried beans, formal). This sample consisted of large white beans. On examination the sample was found to consist of 98 beans, one of these was seen to have been attacked by insects. Six beans had been only slightly attacked while three had been bored, and on separating the cotyledons of these three beans a cavity was visible containing insect excreta. In one of the three beans the excavation was considerable and the cavity contained, in addition to much excreta, insect parts and webbing. The nature of the foodstuff makes long boiling certain during preparation, and for this reason little actual risk of danger to health might be anticipated. The degree of infestation observed would, however, warrant examination of

[The small stock remaining in the shop where the sample was procured was discarded.]

Dried soup ("chicken noodle soup," informal complaint). This was submitted by a sampling officer who was investigating a private purchase complaint that the article contained beetles. The sample itself was contained in the packers' original container which had been opened. The container was a rectangular packet made up of laminated metal foil bearing printed information including the packers' name and address and a list of ingredients, "Egg salt, chicken prior to dehydration, hydrolysed protein, edible oils, sodium glutamate, sugar, wheat starch, onion powder, spice, parsley, flavouring." The contents consisted of two parts, noodles like pieces of vermicelli $\frac{1}{4}$ in. long, and an elongated mass of an almost dry, friable paste which presumably contained all the rest of the declared ingredients. Among the contents were found two living beetles about $\frac{1}{4}$ in. long, identified as "larder beetle" (*Dermestes lardarius*), also a small larva which could have been a larder beetle larva in an early stage and many insect parts which probably were discarded pupa-cases of the same beetle. There were also small masses containing excreta. These findings indicated that the material packed had probably contained eggs or larvae. The larder beetle is often found among farinaceous foods, but the larvae need animal food for development. In this case animal food could have been provided by the chicken as an ingredient.

[Two other packets sold at the same shop, and believed to be of the same batch, were found to be free from infestation and apparently to be in very good condition from the point of view of soundness. A medical officer of health for the area of the packers' factory was notified and the packers themselves were cautioned.]

Energy food (informal). This sample was submitted in the original container which was a waxed carton with a screw-on lid of metal material to the carton. The carton itself bore the traders' name and descriptive wording. An adhesive label on the lid bore the traders' name and the wording included the following: "The golden energy food. More energy than butter." The name and address of the packers was given. Also on the label were a statement of ingredients and a declaration of vitamins. The statement of ingredients was: "Containing grape sugar, cane sugar, cumarine, and other vitamins." In the analysis the composition of the sample was found to consist principally of the following ingredients:—Technical invert sugar 74 per cent; sucrose 4 per cent; water 21 per cent; mineral matter 0.16 per cent; flavouring. Technical invert sugar is manufactured by chemical means from sucrose (or beet sugar) and consists of about equal parts of dextrose and levulose. Technical invert sugar cannot be described as "grape sugar" which in early times has always been the name given to dextrose or crystallised sugar. The statement of ingredients did not agree therefore with the composition found by analysis. Also it was noted that the form of declaration of ingredients was not strictly in accordance with the Second Schedule of the Labelling of Food Order.

[In correspondence, the packers made an admission that the product was "made from cane sugar." They were cautioned, and strongly urged to comply with the Labelling of Food Order in respect of the ingredients and in the declaration of vitamins. The suggested practice with regard to vitamins in "The Advertising Label and the Composition of Food" (Ministry of Food Report, 1949) was recommended to their particular notice.]

ly (table-jelly preparations, informal). A sample was submitted in the
ers' carton, a rectangular box of thin card bearing printed matter. On
of the two largest faces of the carton, and printed directly upon the carton,
the following words in bold type: "Chocolate Cup. No sugar
red." On the other of its two largest faces, the carton bore an adhesive
with printed matter upon the label as follows: "Directions. Place the
nts of this pack in a bowl, add sufficient very hot water to make up the
e to one pint and stir well until completely dissolved. Pour into a mould
ously wetted with cold water, then put in a cool place to set. Ingredients:
gelatine, flavouring, tartaric acid and colouring. The manufacturers
or the indulgence of the public for this temporary pack which is entirely
o difficulties of packing material supplies." The printed matter upon the
was in small type, compared with the words Chocolate Cup on the
. Obviously, the wording upon the label was appropriate for "table
ystals." Neither upon the carton nor upon the label was the product
ere described as "table jelly crystals." On analysis the sample was
to have the composition of "table jelly crystals" complying with the
ements of the Food Standards (Table Jellies) Order, 1949. The sampling
purchased the article as "Chocolate Cup," which name usually means
ttened cocoa product and he expected to receive such a product. There
vidently a major error in labelling, but in circumstances which strongly
ted accident and not fraud. The sample was classified as "wrongly
d."

[The manufacturers were cautioned, and the necessity for correct
labelling was emphasised.]

at products (brawn, formal). A sample procured in a shop was found to
n sulphur dioxide (SO_2) to the extent of 150 parts per million.

[The manufacturers were fined £10.]

ut products (polony, formal). A sample of polony (a cooked product)
ed in a shop was found to contain sulphur dioxide (SO_2) to the extent
parts per million.

[The manufacturers (the same firm as was responsible for the brawn
bove) pleaded in both cases that the addition was contrary to their
structions and due to the inexperience of an assistant. The fine imposed
this case was also £10.]

t products (sausage, formal). On analysis a sample of "beef sausage"
and to contain sulphur dioxide (SO_2) to the extent of 50 parts per
million. The sample bore the sampling officer's note, "preservative not
declared." If the sausage, on sale, had been accompanied by a declaration in the
aid down in the Public Health (Preservatives, etc.) Regulations, or
adequately if there had been a notice in the shop in similar terms, the sample
would have contained up to 450 parts per million of sulphur dioxide.

[Both the shopkeeper who sold the sample and the supplier were
cautioned, and the necessity for the declaration of preservative in sausage
was emphasised.]

Meat products (sausage, formal). This sample was submitted as "servative declared" and the primary examination was for preservative. The sample was found to contain sulphur dioxide (SO₂) to the extent of 6 per million and this is well within the permitted amount. The whole weighed about five ounces. In the course of examination one of the sausages was removed from its skin and was found to enclose a mass of dry fibrous and partly felted matter of a dark grey-brown colour and as big as a pea. With the object of determining its origin, this dark-colored matter was examined microscopically. Normal ingredients, such as pepper, spices and seasonings, were absent. The matter was thus found to be foreign to the sausage. It was found to consist very largely of finely divided vegetable matter among which a few particles of wood and some portions of leaves were recognisable. A definite but faint positive test for bile-salts was obtained, a presumptive indication that faecal matter was present. This foreign matter might be described as a small ball of miscellaneous dirt, was regarded as an indication of a failure to reach a proper standard of cleanliness in the process of manufacture.

[Inspectors visited the factory and required certain structural changes and more hygienic planning.]

Pickles ("piccalilli," formal). This sample was normal in general appearance and its ingredients were substantially in accordance with the statement of ingredients on the label. The portion, submitted in a sealed glass jar, weighed about five and a half ounces. Among the solids present was found a piece of wood, measuring about $\frac{1}{16}$ in. by $\frac{7}{16}$ in. length. After drying it weighed only 0.12 grammes (about 2 grains). It suggested a splinter from a pickling vat. It appeared that this object might possibly have caused damage to the mouth or throat of a consumer and, accordingly, the sample was classified as unsatisfactory.

[The facts were reported to the medical officer of health of the district of manufacture.]

Potato crisps (informal). A sample consisting of an opened transparent paper packet of potato crisps was submitted to investigate a previous complaint that a foreign body was present. On examination, the packet was found to contain, beside the customary small paper screw containing a quantity of crisps, a semi-transparent brown mass resembling very soft jelly, with a very weak rubber-like texture and an unpleasant stale "oil" smell. The remaining crisps weighed just under one ounce and the foreign-like mass weighed about one-seventh of an ounce. On analysis the foreign matter was found to consist of polymerised oil. It was only possible to conjecture how it may have reached the sample. The likeliest source was some hot fat at the manufacturer's plant where hot cooking-fat was exposed for long periods to the air and formed a skin or film on hot metal. In some way some of this film might have become detached and entered the packet. The foreign matter happened to have properties which rendered it aesthetically very objectionable, even disgusting; but, apart from this psychological effect the matter was relatively harmless.

[A cautionary letter was sent to the manufacturers stressing the necessity of preventing a recurrence.]

Preserves (lemon curd, formal). On analysis a sample was found to be deficient in "soluble solids"; that is to say, deficient in sugar. The Food Standards (Preserves) Order, as amended, requires that fruit curd shall contain 65 per cent of "soluble solids"; whereas the sample contained only 27 per cent. The deficiency, expressed as a percentage of the required amount of soluble solids, was thus 2·7 per cent.

[A further formal sample was taken and found to be satisfactory.]

Preserves (marmalade, formal). This sample was found on examination to contain only 65·0 per cent of soluble solids, whereas the Food Standards (Preserves) Order, 1944, requires 68·5 per cent of soluble solids (and no amendment then in force had varied this requirement.) For practical purposes "soluble solids" may be taken to be sugar. The deficiency, expressed as a percentage of the standard proportion of soluble solids, amounted to 5·1 per cent.

[A cautionary letter was sent to the manufacturers.]

Sauce (mustard sauce, informal). This sample was submitted in the manufacturer's original pack, a bottle of about two fluid ounces capacity. A label on the bottle had the description "Mustard Sauce," and a neck-band label had the statement "Prepared from sugar, mustard, malt vinegar, salt, tragacanth, flavouring and spices". There appeared to be a breach of the Labelling of Food Regulations in the following respect:— on analysis the sample was found to contain an acidity equivalent to about 60 per cent to 75 per cent of malt vinegar; to comply with the Order, "malt vinegar" should have been stated in the list of ingredients. Alternatively, it would be necessary to postulate the presence of a quantity of malt vinegar somewhat less than 12 per cent, with the addition of acetic acid as such; in which case the statement of ingredients should include a declaration of "acetic acid" between "malt vinegar" and "mustard". The rest of the analysis was compatible with the presence of the other ingredients in the order stated.

[A cautionary letter was sent to the manufacturers. The product was subsequently relabelled.]

Curry powder (curry powder, informal and formal). The Food Standards (Curry powder) Order, 1949, fixes a limit for lead content of curry powder at 10 parts per million (Pb) per million parts of curry powder. An informal sample submitted in the original pack, namely a small cardboard cylindrical carton with tinfoil lining, was found to contain lead to the extent of 15 parts per million. When a formal sample was procured by mixing and dividing the contents of several such cartons, the proportion of lead was found to lie very close to the limit of 10 parts per million and the formal sample was reported as satisfactory. When a similar type of pack of a different brand was submitted informally on another occasion, lead was found to be present to the extent of 25 parts per million. A corresponding formal sample was requested and was found to contain 25 parts per million of lead per million parts. A certificate of analysis was accordingly issued.

[The packers were strongly cautioned.]

Shredded suet (formal). A sample was found on examination to contain 74 per cent of fat, whereas the Food Standards (Shredded Suet) Order, 1949, requires not less than 83 per cent of fat. In view of the possibility of the presence of starch filler, and consequent interference with the fat content of the product, both on packing and on sampling, a further formal sample was requested. On analysis this sample was found to comply with the standard.

Sweets (informal). Three independent samples were submitted for examination in relation to various purchasers' complaints lodged at the Health Department. A sample of nut-toffee consisted of two large pieces of broken confection containing nuts. Adhering to one of the pieces (both of which had a similar appearance) was one particle which in size and shape resembled mouse-dirt. As a result of microscopic examination of the particle the conclusion was expressed that it was, in fact, mouse-dirt. A sample of chocolate-fudge was in the form of a bar with a D-shaped cross-section and was found to consist of a buff-coloured material (fudge) coated with chocolate. The bar was incomplete, one end having been broken off. Embedded in the broken end of the bar was a piece of metal. This was easily cleaned by washing and was found to be of a somewhat irregular elongated shape, $\frac{3}{4}$ inch long and weighing 1.64 grammes. It had a specific gravity of 7.9, had a greenish sheen and great hardness and toughness, and was strongly attracted to a magnet—characteristics indicative of steel. One surface had a broken appearance, as if the object had been broken from some larger piece of steel. The opinion as to its precise origin was not formed, but it bore marks which suggested that it might have been caught up in some kind of machinery. A sample of French nougat consisted of almost rectangular pieces of a white toffee confection in which were embedded nuts and red fruits resembling cherries. The piece complained of was apparently incomplete, as it appeared to have been broken off at one end. Embedded in the broken end were several dark objects which were identified as the head and parts of the thorax and abdomen of a fly resembling a house-fly. A fly's wing was embedded close to the head. Legs were missing. Judging from the disposition of the insect parts, which were much crushed and distorted, the fly had been present inside the cake before cutting, and the cutting-knife had removed the legs which would be found in another piece of the material, though they did not appear to be present in any piece of the sample submitted. The opinion was expressed that the fly could not have been introduced into the sweetmeat by the manufacturer, nor could it have been impressed upon the piece of sweetmeat after cutting.

[In the case of the nut-toffee, the contamination was deemed to have arisen in the premises of the retailer and remaining stocks were surrendered under the "unsound food" clauses of the Food and Drugs Act. In other cases the foreign bodies found were deemed to have entered the foodstuffs during manufacture. Manufacturers were cautioned, and the respective medical officers of health of the areas of manufacture were notified.]

Drugs.

Glucose with vitamin D and calcium phosphate (informal). This sample was submitted in a carton which bore a declaration including the following: "Calcium phosphate 1 per cent. The remainder of the material consists of substantially of crystalline glucose, containing only traces of a fatty acid, presumably associated with the presence of vitamin D. On analysis the material was found to contain only 0.52 per cent of calcium phosphate. A corresponding formal sample was requested and at first it was reported that the product was not on sale. When a new batch was delivered from the wholesale supplier a formal sample was obtained. It was found however that calcium phosphate was no longer declared as an ingredient.

dedicated lozenges (informal). A pre-packed proprietary article consisted of tablets resembling sweets wrapped in waxed paper and enclosed in a carton. The carton bore printed matter which clearly included recommendation as a medicine in the following terms: "efficacious for dry, husky, sore throats." There was upon the carton no quantitative statement of ingredients and in this respect there was a failure to comply with the Food and Medicines Act, 1941. No other printed matter on any label, wrapper, or slip, could be found in or upon the package to make good any defect on the carton.

[On investigation, the sampling officer found that later cartons issued by the same packers all bore amended wording, including the necessary statement of active constituents and quantitative particulars. No further action was therefore taken.]

Adulteration statistics.

The Food and Drugs Act, 1938, contains the following provision in Section 74:—

Every public analyst shall, as soon as may be after the last day of March, the last day of June, the last day of September and the last day of December in every year, report to the authority by whom he was appointed the number of articles which have been analysed by him under this Act in his capacity of public analyst for their area during the preceding quarter of a year and the result of each analysis.

A guide to Food and Drugs Authorities and their Public Analysts, the Ministry of Health (then the responsible Ministry) issued a Memorandum "Procedure under the Food and Drugs Act, Etc." and referred to as "Memo. 36/Foods." This Memorandum was last revised in 1939 (i.e. after coming into force of the present Food and Drugs Act of 1938) and is still as valid. It contains guidance upon several matters, including public analysts' reports. In an appendix the "suggested form" of a public analyst's report is set out, and in it the data required by the Act are to be given in a particular form. The first table headed "Analyses" is in the form of Table 1 in the report, and the words in the heading of Table 1, "Number adulterated articles otherwise giving rise to irregularity," are taken direct from "Memo. 36/Foods."

At first sight the definition of adulteration might seem very straightforward. The Concise Oxford Dictionary gives this definition—falsification by the substitution of a baser ingredient.

In the nineteenth century adulteration, in the fullest sense of the term, was common. At the same time the advance in the science of analytical chemistry, together with the perfection of the microscope as an optical instrument and the new technique of recognising powdered substances by its means, for the first time made possible the detection of the most common kinds of adulteration.

The exposure of the state of affairs was largely the work of a "Sanitary Commission" set up by the medical periodical "The Lancet." The reports of the Commission, of which Dr. A. H. Hassall was a prominent member, were widely read and led to a public outcry and thus to the beginnings of modern food legislation.

In his book "Adulterations Detected," 1857, Hassall has some ca-
worded remarks on the meaning of "adulteration," which he says

"consists in the intentional addition to an article, for purposes of
"or deception, of any substance or substances the presence of which
"not acknowledged in the name under which the article is sold
"not easy so to frame a definition as that it shall apply to every
"that now given does, however, most certainly embrace the
"majority of adulterations practised, and it excludes substitution,
"impurities, and accidental contaminations, because it specifies
"the addition must be intentional."

In Hassall's view also

"the sale of one article in place of another is not an adulteration
"substitution. Again the presence of substances in articles in consequence
"of impurities contained in the materials out of which they were
"prepared, as, for example, of arsenic in the hydrochloric acid used in the
"preparation of unfermented bread does not constitute adulteration,
"they are simply impurities. Lastly, the accidental presence of
"stances in any commodity does not constitute adulteration,"

but what Hassall terms "accidental contamination."

For many years until the 1939 war interfered with publication, the Ministry
of Health produced a short annual summary of the reports of public analysts
in the form of a booklet called "Sale of Food and Drugs." In the summary
for 1931 to 1933, for example, the degree of adulteration was reported
text in the following form (taken from the 1933 edition): "7,601 samples
reported as adulterated or not up to standard. The percentage adulterated
or below standard was 5.5." Yet in the tables for the same year the
figure 5.5 appears for the total of all samples under the heading "Percentage
adulterated." In the corresponding editions of "Sale of Food and Drugs"
for the years 1934 to 1937 inclusive the degree of adulteration is stated
text in the form (taken from the 1937 edition): "The number of samples
reported against was 8,401, or 5.5 per cent," but again in the table the
5.5 appears as "Percentage adulterated." For the first time the 1938
of "Sale of Food and Drugs" (and this was the last of these booklets to
separately) while still using in the text the words "the number reported
was 8,433 or 5.7 per cent," has a footnote to the tables related by an asterisk
to the heading "Percentage Adulterated*" and the footnote states, "This
includes all samples giving rise to irregularity, e.g., adulteration, labelling
offences, etc."

Those who have been accustomed to examine adulteration statistics for a
number of years are probably well aware that in any public analyst's or
report the term "percentage adulterated" means "percentage adulterated,
otherwise giving rise to irregularity" though the meaning has not always
explicitly stated. In some reports alternative terms have been adopted,
example, "percentage adulterated, etc.," "percentage irregular," "percentage
unsatisfactory," "percentage condemned," "percentage incorrect," "per-
centage not up to requirements." There may even be some classification of
unsatisfactory samples, for example the following system has been used in
many years:—the data given are, total number of samples, number
"adulterated," number "inferior," number "unsatisfactory" (=adulterated
inferior), and "total percentage unsatisfactory."

a matter of interest, Hassall's early attempts to define adulteration have been given above. At the present time there are few who would make a distinction between adulteration and gross contamination. Thus, some years ago, "lemonade" was made from lemon juice and kept in "galvanised" buckets so that it caused illness from zinc poisoning, the lemonade might have been described as "adulterated," as was the beer grossly contaminated with arsenic during the arsenic scare at the beginning of the century, or the powder which contained as an ingredient potassium carbonate contaminated with arsenic. What Hassall distinguished as "substitution," if not a substitution of an inferior composition as a food, or of lower cash value.

On the other hand there are many instances which could not reasonably be described as adulteration but rather as "otherwise giving rise to irregularity." Examples of such irregularity are given below.

IRREGULARITY.

Failure to comply with a Food Standards Order. (Such a failure may or may not be the result of a definite "adulteration.")

Failure to comply with Labelling of Food Order.

Failure to comply with appropriate Public Health Regulations, e.g.:—

Condensed milk.

Dried milk.

Preservatives and colouring matters in food.

Failure to comply with the labelling provisions of the Pharmacy and Medicines Act.

(In appropriate cases.) Failure to comply with the Merchandise Marks Act.

Defraudulent misdescription of an article otherwise satisfactory. Substitution by a less valuable article equivalent in use.

Contamination: Presence of gross foreign matter or "dirt," iron wire, nails, broken glass, splinters of wood. Presence of more insidious contaminants, e.g. metallic impurities, arsenic, lead, copper, zinc, tin, chromium, etc. Local excess of a permitted ingredient, bicarbonate spot in cake.

Contamination: Presence of insects, mites or other infestants or their parts. "Filth," evidence of recent infestation. Spoiled food caused by infestation.

Offence of composition, incipient decomposition or taint. "Unsoundness."

Contamination from packing materials or from neighbouring materials on storage, if sufficient to cause a definite defect in quality.

NOTES ON IRREGULARITIES LISTED ABOVE.

For example, the Food Standards (Shredded Suet) Order requires a minimum of 3 per cent of beef fat to be present in shredded suet, which is now usually made from refined beef fat and flour. Thus 17 per cent. of flour may lawfully be present in such a product. If a sub-standard mixture is made (and this may arise from a mistake in manufacture, causing a local excess of flour), it is probably more logical to consider it as a shredded suet failing to comply with the standard than as a shredded suet "adulterated" by the addition of excess flour. The facts of the case may be emphasised or minimised the "adulteration" aspect.

2. The Food Standards Orders and the Labelling of Food Order derived their powers from Defence Regulations and have been kept in force by year-to-year legislation.

Several Public Health Regulations, originally made under various Public Health Acts, are now kept in force, modified, or amended, by means of powers conferred by the Food and Drugs Act.

In *Sandys v. Rhodes* (1903) the High Court held that no offence had been committed in selling tapioca as sago, and this case is still quoted. (Presumably the "offence" in question would be selling to the prejudice of the purchaser a food not of the nature or not of the substance or not of the quality demanded; or more precisely, a breach of the corresponding section of the Act then in force.)

7. Very much more importance has been attached to gross accidental contamination in recent years and the ordinary purchaser has responded to the publicity given on this subject by bringing more complaints to the notice of Food and Drugs Authorities. Reputable firms are giving increased attention to hygiene and "good housekeeping" within their factories.
9. Here the province of the public analyst runs parallel with that of the bacteriologist. Sometimes the same person combines the two functions, but more often two laboratories are in operation, and in such circumstances close collaboration is of the highest value. When pathogenic organisms are present in food the responsibility for the examination devolves entirely upon the bacteriologist.

It has been pointed out many times that "adulteration statistics" are misleading. The annual review, "Sale of Food and Drugs," mentioned above had some warnings on this subject. The "percentage adulterated or otherwise giving rise to irregularity" reflects too many variables at one time. If no adulterations or irregularities occurred then the said percentage would obviously be zero, but if any adulterations and irregularities do occur, the "percentage adulterated, etc." figure is affected by the system of sampling and the efficiency of those who examine samples, and not only by their efficiency but by their personal idiosyncrasy in deciding where to draw the line between the "genuine" and just sufficiently "irregular" to deserve comment.

One very obvious effect of the system of sampling may be mentioned here. For very many years sampling officers have been encouraged to use their discretion in deciding in given circumstances whether to sample "formally" (i.e. according to all the requirements of division into three parts, etc., laid down in the Act) or "informally" (i.e. without complying with all the requirements, and this means that the sample is not divided, and no portion is left with the vendor). If we can envisage two areas for which we postulate the same average level of "adulteration, etc.," and in one a certain number of samples all taken formally, and in the other the same number all taken informally, then (at this stage) the percentage of samples reported as "adulterated, etc." in the two areas will (on the average of a large number of samples, and with the same degree of strictness) be the same. But in most cases it is not possible to follow an informal sample, when found incorrect, with a formal one. This latter sample might itself be genuine, and occasionally is, but it is much more likely to turn out incorrect than a similar sample taken at random. When all the necessary formal samples have been taken, and their results combined with the rest, it is obvious that the "percentage adulterated, etc." in the area where all the original sampling was informal, will appear to be greater than in the other area (it might appear almost twice as great); though we have postulated the same level of adulteration for both. This comment is intended as a recommendation against informal sampling in appropriate cases. It is often very valuable to an analyst to have a "preliminary run" on a new or difficult article, and it is often useful to see the material in its original container.

Sampling by a keen and experienced officer will produce a higher percentage "adulteration, etc." than sampling by an efficient random sampler. From the point of view of statistics the latter is desirable. A combination of the two methods would in my view be a useful compromise, leading to a more intelligent sampling of an intelligent "cross-section" of all articles of food and drugs offered for sale but directing a keen eye towards the more obviously "suspect" foods and drugs.

Ice cream.

The standard for the composition of ice cream has been subject to periodical revision by the Ministry of Food, according to the availability of fat, sugar and other products. The Food Standards (Ice Cream) Order, 1951, regulated the composition of the product to contain not less than 5 per cent fat, 10 per cent sugar and 7½ per cent non-fatty milk solids. An amendment in July, 1952, reduced the minimum fat content to 4 per cent and the minimum non-fatty milk solids to 5 per cent. In June, 1953, the standard was restored to that of 1951. Perhaps, speculatively, one might even look forward to the day when a special provision might be made for a special quality of ice cream, the fat content of which should consist entirely of butter fat!

During the year, 33 samples were examined, and every sample complied with the standard. The minimum fat content observed was 6·9 per cent and the minimum sugar content 10·2 per cent. Percentages of sugar ranged from 10·2 to 16·2 per cent., while the range of fat content is given in Table 6 below.

TABLE 6.
Fat content of ice cream.

Percentage of fat	Numbers of samples
Below 7·4	1
7·5 to 9·9	10
10·0 to 12·4	20
12·5 and over (maximum 12·7)	2
	<hr/>
	33
	<hr/>

Ice lollies.

A special investigation by inspectors of the Milk Control Section led to the selection of 36 informal samples to be examined for harmful metallic impurities. Included in the 36 samples were two samples of "ice-cream lollies" and "lolly syrup" (a product suitable for dilution with water before freezing). The samples were examined for the most dangerous commonly occurring metallic elements, namely arsenic, lead and copper. The amounts of these elements found in the samples fell within limits which may be accepted as safe.

When it is remembered that the fluid frozen to make lollies need only be in contact with the mould for a few hours at a low temperature, it may be deduced that with reasonable care there would exist little risk of excessive metallic contamination from the moulds. In the samples examined, no relation could be traced between the composition of the mould and the amount of metallic impurities found in the lolly. Still, it must be admitted that if moulds, during the process of freezing, were left in an unclean condition, either moistened with lolly-mix or corroding in air, then the next lollies frozen in them would be at a greater risk of metallic contamination. These considerations emphasise the need for careful inspection of lolly-freezers.

It remains the possibility of the presence of metallic contamination in the ingredients of the fluids prepared for freezing. Some of these ingredients may have been in contact with metals during manufacture. Where actual lolly-mix is an ingredient, some contamination may occur from metallic sprays used as sprays by fruit growers.

Results for 36 samples, expressed in parts per million, are as follows:

Arsenic (as As)	.. ..	0.1 or less
Lead (as Pb)	.. ..	0.1 or less in 17 samples 0.5 in 3 samples 0.16 average of 36 samples
Copper (as Cu)	.. ..	1 or less in 13 samples 1 to 2 in 22 samples 12 in 1 sample.

Moulds were reported to be of the following materials: glass, plastic-covered metal, aluminium, tinned copper, soldered "metal."

The sample stated in the table to contain 12 parts per million of copper was the "lolly syrup" mentioned above. From examination in comparison with the "lolly" prepared from it, this syrup must have been diluted over 20 times, and the copper content (in itself not very alarming) reduced to quite negligible proportions before consumption.

Nevertheless, it was deemed advisable to pursue further the investigation of the metallic impurities in lolly syrups and concentrates. Nine samples having widely different dilution factors, were examined with the following results:—

Recommended dilution		Parts per million		
Sample	: water	Arsenic (As)	Lead (Pb)	Copper (Cu)
1	: 1	nil to 0.1	nil to 0.1	1 to 2
1	: 4	nil to 0.1	nil to 0.1	nil to 1
1	: 7	nil to 0.1	nil to 0.1	1 to 2
1	: 9	nil to 0.1	10	1 to 2
1	: 9	nil to 0.1	3.5	3
1	: 9	nil to 0.1	nil to 0.1	2 to 3
1	: 19	nil to 0.1	nil to 0.1	1 to 2
1	: 49	nil to 0.1	40	15
1	: 800	nil to 0.1	nil to 0.1	2 to 3

After taking into account the dilution before consumption, most of the figures are quite acceptable. Perhaps two samples may be picked out as borderline cases; where lead occurs to the extent of 10 parts per million in a syrup to be diluted 1 : 9, and to the extent of 40 parts per million in a syrup diluted 1 : 49. These would produce a lead content of about 1 part per million in the final product, and if such a lolly liquor were subjected to exposure to lead-containing metallic apparatus, this one part per million might make a significant contribution to a total lead-content which might transgress the safe limit.

An attempt was made at the factory to secure a sample of every ingredient of the syrup the lead content of which was found to be 40 parts per million. After a short lapse of time it is exceedingly difficult to trace the precise container from which each ingredient is drawn. Specimens were obtained representing as nearly as possible the same batches of the ingredients as were in the actual preparation of the syrup in question. These specimens were marked: orange concentrate, orange oil emulsion, liquid colour, citric acid (solution), sodium metabisulphite (solution), gum karaya (mucilage). One specimen was actually submitted which could account for the amount of lead in the manufactured syrup. (This last part of the investigation is mentioned for completeness, though the analyses were performed during the year

Drinking water.

Table 7 summarises the samples of drinking waters examined during the year. The purpose of chemical analysis of water in this laboratory is to assist in maintaining a check on the quality of water as viewed from the health point of view. Corresponding samples are usually submitted to the Regional Health Laboratory for bacteriological examination and information is exchanged between the two laboratories. The examination of samples taken to investigate complaints fully or partially justified the complaints in 12 cases, in the other 23 instances no support was afforded to complainants' statements. In spite of prompt action in sampling, it may happen that a condition which gave rise to a complaint has ceased to exist by the time the sample is taken. Of the 31 taken for routine examination or as checks on previous complaints 12 were found to be somewhat unsatisfactory.

The types of complaint made were very similar to those of previous years. Included reports of the presence of "insects," "discolouration," "sediment," "dirty water" and "offensive taste and smell." The "insects" were water-fleas (*Daphnia* or *Cyclops*) in every instance. Although many crustaceans are themselves harmless it is not surprising that they cause alarm when seen swimming in drinking water. The discolouration of the water supply at intervals is apparently due to natural colouring matters in the water from the Longdendale catchment area. Though very pronounced in some cases, the colour does not in itself render the water unwholesome. Complaints of "sediment" and "dirty water" generally arose when silt from the mains was washed through the taps. Action by the Waterworks Department usually caused the trouble to be speedily cleared up. The one complaint of "offensive taste and smell" was not supported by the sample taken.

Whether a sample is or is not submitted in consequence of a particular complaint (present or past), it is subjected to a full general analysis, and details of pH, reaction (pH), certain dissolved constituents, colour and turbidity are recorded. These results are reviewed in relation to the wholesomeness of the water supply. In particular, 66 samples were tested for the presence of lead. In all samples the amount of lead was 0.1 parts per million or less and in only one case did the lead figure lie between 0.1 and 0.2 parts per million.

A single sample classified as "miscellaneous" was one of water percolating into the basement of a factory and the analysis was undertaken in order to determine, if possible, whether the water was escaping from the public mains.

TABLE 7.

Numbers of water samples examined.

Samples taken to investigate complaints	35
Routine examinations and checks following previous complaints	31
Miscellaneous	1
	67

Samples submitted by various sections of the Health Department.

Investigation of suspected food-poisoning. The possibility of irritant substances in food as a cause of illness was eliminated by analysis of samples of different brands of canned tomatoes from two unconnected sources.

Investigation of complaints. No harmful substance was found in the door-stamp-hinges suspected by a user to have caused illness.

Two special detergents recommended for large-scale use were examined to determine any possible harmful effects on personnel regularly employed in applying them.

Samples submitted by other Corporation departments.

(a) Markets Department. A sample of cooked salmon was examined for harmful substances. Skin and fatty tissue from a pig were examined to determine the cause of a yellow discoloration.

(b) Education Department. Five "dust-allaying" oils were tested in relation to specification.

(c) City Architect's Department. Two emulsion paints and one emulsion paint-thinner were tested in relation to instructions to a contractor.

Samples from other sources.

(a) Port of Manchester Health authority. Thirty-two samples of imported foodstuffs have been examined. These may be classified according to the purpose of the analysis as follows: for injurious metallic impurities 19, for preservatives 7, for prohibited colouring matters or for declared edible colours 6, for general composition 1. (One sample appears both for preservatives and for prohibited colours.)

(b) Hospital management committees. A sample of sausage was examined in relation to specified meat-content. A sample of medicinal galactose was examined for purity. Specimens of hair and skin-flakes were examined for traces of arsenic.

(c) Private firms submitted the following samples for general information or in relation to various statutory declarations or requirements; sweet cornflour 10, flour 4, chocolate-covered wafer biscuits for overall percentage sucrose 2, canned stewed steak for soundness, deep-frozen pineapple in cans for soundness, "Italian chalk" for suitability as dusting powder for confectionery 2.

(d) Private individuals submitted the following samples: milk for harmful substances (2 samples), dried peas for soundness, dispensed medicine checked against prescription, glycerine of pepsin to be checked against I.P. requirements, tablets to be checked against prescription (2 samples), water for taint, flakes of paint to check compliance with specification.

Chemical examinations for H.M. Coroner.

At the request of the Manchester City Coroner, human organs and their contents, together with other exhibits, have been examined in connection with two inquests. In the preparation of evidence for these inquests human organs or physiological specimens and five related exhibits were examined. In one case the verdict included the finding that death was consequent upon poisoning by sodium fluoride. In the other case a verdict of natural cause was returned, for, though amylobarbitone (in capsules) was in the possession of the deceased, the amounts found in the body were consistent with the use of not more than medicinal doses.

Measurement of atmospheric pollution.

This work has for its object the collection of data for the Atmospheric Pollution Research Branch of the Department of Scientific and Industrial Research. When the results are considered on a sufficiently long-term basis, they may reveal any significant trends, for better or worse, in the degree of pollution of the air at selected points within the Manchester boundary. The station maintains eight "deposit gauges," three gravimetric sulphur-dioxide ("lead peroxide apparatus") and one "volumetric sulphur-dioxide and smoke" apparatus, and these are all visited and operated by the laboratory staff. In the last annual report it was indicated that the work involved over 100 separate determinations or analyses during the year. The work has been continuously maintained at this level. Results are appended in tabulated form.

Monthly average figures for sulphur dioxide and smoke, calculated by monthly means for the year and four preceding years, are given in Table 8.

TABLE 8.

Volumetric apparatus for sulphur dioxide and smoke.
Rusholme.

	Daily average sulphur dioxide— parts per million					Daily average smoke— milligrammes per cubic metre				
	1953	1952	1951	1950	1949	1953	1952	1951	1950	1949
.. .. .	0.211	0.169	0.144	0.164	0.199	0.488	0.393	0.368	0.353	0.262
.. .. .	0.153	0.203	0.086	0.118	0.205	0.326	0.442	0.230	0.264	0.211
.. .. .	0.197	0.111	0.120	0.116	0.237	0.447	0.251	0.302	0.289	0.279
.. .. .	0.089	0.103	0.062	0.082	0.147	0.180	0.208	0.228	0.277	0.164
.. .. .	0.063	0.074	0.042	0.073	0.144	0.130	0.206	0.209	0.200	0.186
.. .. .	0.068	0.067	0.028	0.043	0.121	0.159	0.167	0.171	0.115	0.136
.. .. .	0.029	0.060	0.039	0.047	0.110	0.075	0.126	0.158	0.152	0.112
.. .. .	0.046	0.052	0.046	0.035	0.084	0.123	0.161	0.164	0.180	0.169
r	0.062	0.092	0.062	0.052	0.096	0.185	0.269	0.213	0.275	0.162
.. .. .	0.134	0.106	0.092	0.078	0.074	0.389	0.312	0.319	0.315	0.236
r	0.088	0.182	0.101	0.165	0.145	0.241	0.539	0.214	0.525	0.237
f	0.139	0.183	0.113	0.211	0.125	0.363	0.422	0.290	0.567	0.236
Daily figure for year	0.11	0.12	0.08	0.10	0.14	0.26	0.29	0.24	0.29	0.20

The highest daily figure for the sulphur dioxide content of the atmosphere was obtained on January 20th, when 0.655 parts per million were reported, and the corresponding lowest figure was 0.011 on July 27th.

The highest daily figure for smoke content, namely 1.716 milligrammes per cubic metre, was obtained on January 5th; the lowest concentration of smoke, obtained on May 18th, was 0.041 milligrammes per cubic metre.

Table 9 gives average values for the amount of atmospheric deposit per month at seven points within the Manchester area and at one neighbouring point in the Cheshire area, with the previous year's figures for comparison.

TABLE 9.
Deposited atmospheric pollution
(tons per square mile)
Monthly averages.

Station	Rainfall (inches)		Insoluble matter		Soluble matter		1951
	1953	1952	1953	1952	1953	1952	
Baguley	2.2	2.2	4.70	8.36	6.47	7.99	11.1
Booth Hall	2.6	2.6	8.72	8.79	6.46	7.09	15.1
Heaton Park	2.7	2.8	6.52	10.93	5.44	8.95	11.9
Monsall	2.4	2.5	11.09	18.17	7.53	8.09	18.6
Philips Park	2.6	2.7	16.70	28.03	10.26	11.07	26.9
Rusholme	2.4	2.6	12.15	16.66	7.40	10.02	19.5
Withington	2.2	2.5	10.57	13.59	5.28	7.30	15.8
Average for all gauges	2.4	2.6	10.06	14.93	6.98	8.64	17.0
Knowle House (Cheshire)	2.3	2.5	3.21	3.68	4.19	6.15	7.0

The results of the measurement of sulphur pollution, by the lead peroxide method, are given for three stations at monthly intervals. This method of presentation shows very clearly the regular rise and fall of the average sulphur pollution with the seasons. The pollution is of course heavy in winter and relatively light in the summer. (Table 10.)

The lead peroxide (gravimetric) method is somewhat arbitrary. It depends upon a chemical reaction between sulphur dioxide gas (and to a much extent other sulphur compounds) and a prepared surface of lead peroxide. The method requires strict standardisation of controllable conditions. It is, however, must be somewhat affected by uncontrollable conditions such as wind strength, and by temperature, pressure and humidity of the air. When 100 square centimetres of the prepared surface has absorbed, say, 10 grammes of sulphur dioxide from the surrounding air in a day, it is impossible to infer in what volume of air that amount of sulphur dioxide was contained. It may be said in favour of this arbitrary method that it is a good indicator of the relative intensity of attack by air of different degrees of pollution on things as buildings or steel girders. Whereas the standard method published by the D.S.I.R. requires the results of the volumetric sulphur dioxide apparatus to be reported as sulphur dioxide (SO₂), the standard method for the lead peroxide instrument requires results to be reported as sulphur trioxide (SO₃). Though it is not very clear why these different modes of presentation have been selected, the numerical relation between the two is simple. Five parts by weight of SO₃ are equivalent to four parts by weight of SO₂. Also, four parts by weight of SO₃ are equivalent to two parts by weight of sulphur

TABLE 10.

Sulphur pollution.

(Measurements by lead peroxide method.)

in milligrammes SO_3 per 100 square centimetres exposed surface per day.

	Monsall		Rusholme		Withington	
	1953	1952	1953	1952	1953	1952
.. .. .	7.51	5.97	4.29	4.24	3.24	2.59
.. .. .	4.85	5.62	3.75	4.46	2.36	2.71
.. .. .	5.53	4.28	3.64	2.96	2.59	2.15
.. .. .	3.50	3.77	2.35	2.31	1.53	1.51
.. .. .	2.74	2.92	1.53	1.72	1.03	0.93
.. .. .	2.19	2.49	1.84	1.50	1.09	0.88
.. .. .	2.52	2.17	1.07	1.38	0.52	0.65
.. .. .	2.78	2.38	1.22	1.18	0.51	0.64
r	3.28	2.72	1.38	2.75	0.85	1.40
.. .. .	4.55	4.63	2.33	2.96	1.79	1.93
r	6.00	6.01	2.14	4.75	1.37	3.39
r	5.40	6.70	3.20	4.32	2.48	2.71
average	4.23	4.13	2.39	2.87	1.61	1.79

MANCHESTER AND DISTRICT REGIONAL SMOKE ABATEMENT COMMITTEE

Honorary Secretary :—C. Metcalfe Brown, M.D., D.P.H., Barrister-at-Law

The Manchester and District Regional Smoke Abatement Committee is an advisory organisation of 82 local authorities in South Lancashire and Cheshire, covering an area of about 700 square miles. The Committee's assistance is available to member authorities for technical and other purposes concerning all forms of atmospheric pollution.

A meeting of the Committee was held in Manchester in December 1953 and meetings of the Executive Committee took place in January and February 1954. The Committee has considered a large number of suggestions from constituent authorities as to the control and abatement of atmospheric pollution by various means.

As a result, it was decided to submit a statement of representations to the Committee on Air Pollution which was appointed by the government in 1953 and is under the chairmanship of Sir Hugh Beaver.

A number of enquiries and requests for technical assistance were received by the Committee's officers during the year, particularly with reference to industrial dusts and fumes and smoke nuisances generally.

The Committee noted with satisfaction the decision of the Ministry of Housing and Local Government to appoint an Inspector of Alkali works for the Manchester area.

A considerable extension took place during 1953-54 in the Committee's two joint schemes for investigation of atmospheric pollution in conjunction with the Department of Scientific and Industrial Research. Two meetings of committees dealing with the joint schemes were held. Particulars as to the extent of the observations are as follows :—

	Local Authorities	Deposit Gauge	Apparatus	
			Sulphur (Lead peroxide)	Smoke filters
Maintained by Regional Smoke Abatement Committee	37	12	80	—
Maintained independently by member authorities	9	35	23	9
Totals	46	47	103	9

In November, 1953, the Assistant Secretary, Mr. C. A. Hay, M.B., was appointed Chairman of the Standing Conference of Co-operating Bodies on Atmospheric Pollution and a member of the Atmospheric Pollution Research Committee of the Department of Scientific and Industrial Research.

Investigation of Atmospheric Pollution—Carrington-Partington Area
 MEASUREMENT OF SULPHUR DIOXIDE expressed as mgm. SO₂/day/100 cm² Batch A PbO₂
 (poured cover).
 Mean results May-September; W₅=mean results November-March; Y₁₂=yearly mean
 April-March.

SITE	Mean results for period 1948-1953			1952-53			1953
	S ₅	W ₅	Y ₁₂	S ₅	W ₄	Y ₁₁	S ₅
Low R.D.							
Carrington, Ackers Farm	0.80	1.54	1.14	0.82	1.37	0.97	1.06
Carrington, Moss Hall Farm	1.03	1.75	1.34	1.41	1.81	1.31	1.31
Ham Massey, Green Lane Farm	0.68	1.40	0.99	0.67	1.49	0.92	0.82
Carrington, Gas Works	2.35	3.81	2.92	2.43	3.39	2.61	2.80
Burton, Bent Farm	0.63	1.25	0.89	0.52	1.22	0.74	0.58
M.B.							
Warrington Airport	1.12	2.00	1.51	0.93	1.75	1.16	1.46
U.D.							
Warrington, Moss Park	1.00	2.06	1.49	0.94	1.94	1.26	1.38
Warrington, Moss View Farm	0.81	1.74	1.23	0.72	1.52	0.97	0.99
Warrington, Moss Works	0.92	1.55	1.20	0.80	1.35	0.97	1.12
Warrington, Moss Side Farm	0.61	1.21	0.83	0.61	1.19	0.82	0.76
M.B.							
Warrington, Moss School	0.84	1.90	1.31	0.80	1.78	1.13	1.01
Warrington, Moss Ways Depot	0.86	2.04	1.38	0.86	2.23	1.33	1.12
Warrington, Moss Works	0.90	1.95	1.28	0.90	1.95	1.21	1.04
M.B.							
Warrington, Moss Park	1.01	2.22	1.55	0.95	1.96	1.26	1.19
Warrington, Moss Wick, Mosley Road	4.28	6.42	3.59	2.60	4.59	3.17	9.53
Warrington, Moss Wick, West Works	3.14	4.32	3.59	2.40	3.23	2.44	7.65
U.D.							
Warrington, Moss Road	0.99	1.93	1.41	0.94	1.81	1.33	1.14
Warrington, Moss Road	0.68	1.57	1.08	0.63	1.42	0.97	0.74
Warrington, Moss Works, Davyhulme	1.30	2.57	1.90	1.14	2.50	1.76	1.87
Warrington, Moss Burne Park	1.07	2.32	1.61	1.03	2.34	1.58	1.15
Warrington, Moss Power Station	2.01	2.77	2.37	1.94	3.29	2.59	1.43

DIRECTION (Percentage of total observations)							
.. .. .	5.2	6.2	5.5	6.5	9.6	7.9	4.2
.. .. .	8.4	5.1	6.5	8.9	7.4	8.2	6.1
.. .. .	8.1	7.2	8.0	5.1	7.2	6.1	5.8
.. .. .	5.0	8.5	7.0	4.7	3.7	4.2	7.9
.. .. .	25.7	36.3	30.7	19.7	35.0	27.0	31.1
.. .. .	14.9	12.3	13.7	14.8	8.6	11.9	14.3
.. .. .	18.7	14.6	16.8	26.5	12.2	19.7	18.9
.. .. .	14.0	9.8	11.8	13.8	16.3	15.0	11.7
Temperature °F... .. .	57.1	40.6	48.8	56.8	39.7	48.3	58.0

Investigation of Atmospheric Pollution, Joint Scheme No. 2

ESTIMATION OF SULPHUR DIOXIDE expressed as mgm. SO₂/day/100 cm² Batch A
(louvred cover).

S₅=mean results May-September; W₅=mean results November-March; Y₁₂=yearly
April-March.

Site	Apr. 1953	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Means			
										Winter		Summer	
										1951 -52	1952 -53	1952	1953
Audenshawe U.D. Ryecroft Hall	2.05	1.40	1.39	1.43	1.48	1.68	1.99	2.53	2.55	2.31	2.14	1.00	1.4
Chadderton U.D. 132, Birch Lane Grammar Sch.	1.71 3.08	1.21 2.34	1.07 1.67	1.23 2.20	1.04 *	1.55 2.81	2.29 3.92	2.96 5.39	2.58 4.70	— 3.14	2.08 2.81	0.82 1.25	1. 2.
Crompton U.D. Croft Bank .. Home Farm ..	1.58 2.47	1.10 1.70	1.04 1.27	1.03 2.52	0.85 1.76	1.30 2.33	1.99 2.61	2.97 4.06	2.36 3.06	2.08 2.42	2.07 2.22	0.79 1.18	1. 1.
Denton U.D. Sewage Works Town Hall ..	1.61 2.21	1.19 1.53	1.04 1.39	0.95 1.11	0.75 1.19	0.93 1.44	1.13 1.78	0.77 1.85	1.74 2.31	1.76 2.23	1.62 2.19	0.77 1.05	0. 1.
Droylsden U.D. Cemetery ..	2.66	1.63	1.55	1.63	1.60	1.94	2.52	3.43	3.19	2.84	2.58	1.28	1.
Dukinfield M.B. Dukinfield Pk.	1.90	1.24	1.19	1.12	1.10	1.56	2.04	2.91	2.29	2.42	2.29	1.06	1.
Failsworth U.D. Highways Dept.	2.50	*	1.91	2.17	2.10	2.20	3.14	3.64	3.11	2.64	2.60	1.18	2.
Farnworth M.B. Sewage Works Highways D'pt	2.16 2.80	1.70 2.33	1.52 2.21	1.19 1.54	1.31 1.70	1.97 *	2.46 4.07	3.29 3.76	3.55 4.60	— —	— —	— —	1. 1.
Hyde M.B. Birch Hse. Yrd. Reservoir ..	2.21 1.85	1.37 1.64	1.56 1.56	1.75 1.21	1.12 1.39	1.76 1.46	2.70 1.69	2.40 2.08	3.07 2.42	2.07 2.13	2.31 1.76	1.04 1.04	1. 1.
Lees U.D. .. Cemetery ..	1.72	0.98	1.16	1.04	0.90	1.14	1.62	1.80	1.91	2.00	1.67	0.85	1.
Limehurst R.D. Sewage Works	2.57	1.60	1.59	1.58	1.56	1.96	2.59	3.28	3.32	—	—	—	1.
Littleborough U.D. Sewage Works New Barn Farm	2.62 2.17	1.98 1.40	1.34 1.39	1.74 1.67	1.25 1.16	1.98 1.90	2.92 2.75	4.13 4.04	3.56 3.73	— —	— —	— —	1. 1.
Little Lever U.D. Cricket Ground	3.11	2.16	1.58	2.05	2.03	2.75	3.50	5.10	4.36	—	—	—	2.
Middleton M.B. Town Hall .. Thornham Sch.	1.85 2.27	1.18 1.50	0.94 1.42	0.88 1.75	0.68 1.50	0.95 2.06	1.50 2.99	2.66 4.20	2.43 3.40	2.08 2.37	2.01 2.22	0.76 1.06	0. 1.
Mossley M.B. Town Hall .. Lower Hey Frm.	1.85 2.43	1.31 1.37	1.25 1.08	0.98 1.19	0.91 1.11	1.23 1.27	1.81 1.67	1.94 1.81	2.05 2.05	1.66 2.15	1.82 1.93	0.84 1.07	1. 1.
Milnrow U.D. Pumping Station	1.96	1.30	1.10	1.50	1.29	1.72	2.12	3.47	2.70	—	—	—	1.
Oldham C.B. Haven Lane Nursery .. Horseclae St. Nursery .. Westhulme H. Westlands .. Alexandra Pk.	2.15 3.62 2.87 3.53 2.41	1.38 2.47 1.79 2.32 1.61	1.30 1.94 1.62 2.32 1.49	1.42 2.50 1.96 2.41 1.69	1.25 2.35 1.70 2.13 1.58	1.50 2.96 2.21 2.66 1.69	2.09 4.28 3.29 3.71 2.10	3.30 5.94 3.55 4.86 4.05	2.61 4.73 3.80 4.00 2.67	2.39 3.74 3.14 3.59 2.84	2.17 3.40 2.68 3.21 2.19	1.01 1.63 1.23 1.55 1.16	1. 2. 1. 2. 1.
Prestwich M.B. Town's Yard Sewage Wks.	2.16 2.85	1.78 2.07	1.49 1.76	1.47 2.31	1.56 2.30	2.09 2.87	3.28 3.14	3.01 3.89	3.73 3.74	2.73 2.98	2.68 2.48	1.13 1.30	1. 2.

Location	Apr. 1953	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Means				
										Winter		Summer		Year
										1951-52	1952-53	1952	1953	
M.B. Primary Sch. Park ..	2.58 2.30	2.37 1.48	1.76 1.23	1.66 1.36	1.35 1.32	2.24 1.60	3.52 2.41	3.82 3.72	4.19 3.03	— —	— —	— —	1.88 1.40	— —
J.D. Chadder ..	2.49 2.13	1.85 1.52	1.75 1.21	1.89 1.52	1.68 1.40	2.48 1.92	3.61 2.61	5.06 3.93	3.95 3.20	2.58 2.61	2.66 2.06	1.02 1.03	1.93 1.51	1.64 1.47
M.B. Grnd. ..	2.33 2.16	1.66 1.78	1.72 1.48	1.62 2.05	1.60 1.76	2.10 2.33	3.06 2.53	3.02 3.46	2.69 2.61	2.54 2.39	2.25 2.05	1.24 1.11	1.74 1.88	1.65 1.51
J.D. M.B. Park ..	2.42 2.63	1.97 2.01	1.67 1.81	1.24 1.04	1.13 1.43	1.88 2.39	2.93 3.82	3.22 3.49	3.87 3.92	2.41 2.93	2.38 2.79	1.04 1.22	1.58 1.74	1.60 1.92
J.D. Grnd. Works	1.58 1.89	1.13 1.37	0.95 1.26	1.38 1.37	0.86 1.55	1.31 1.91	1.82 2.42	1.96 3.62	2.38 2.99	1.70 2.22	1.78 2.01	0.77 1.04	1.13 1.49	1.19 1.43
J.D. Facility	1.33	0.93	0.79	1.01	0.99	1.41	2.02	2.92	2.30	—	—	—	1.03	—

* Apparatus damaged

DIRECTION (Percentage of total observations)

..	0.9	2.6	13.6	2.5	0.9	2.7	4.5	1.2	3.5	4.9	9.6	6.5	4.2	7.9
..	11.4	6.8	16.5	4.1	0.9	3.5	5.4	0.0	6.2	4.9	7.4	8.9	6.1	8.2
..	13.2	14.5	7.7	2.5	0.9	3.5	7.2	0.0	10.6	6.9	7.2	5.1	5.8	6.1
..	8.7	13.7	8.7	0.8	1.7	15.0	10.8	0.0	14.2	6.5	3.7	4.7	7.9	4.2
..	21.1	25.7	14.6	36.0	36.8	40.7	52.3	61.2	41.6	36.8	35.0	19.7	31.1	27.0
..	12.3	9.4	4.9	25.4	20.5	9.8	7.2	30.6	3.5	14.6	8.6	14.8	14.3	11.9
..	18.4	6.8	19.4	20.5	29.0	18.6	5.4	7.0	8.9	16.4	12.2	26.5	18.9	19.7
..	14.0	20.5	14.6	8.2	9.4	6.2	7.2	0.0	11.5	8.8	16.3	13.8	11.7	15.0
..	44.9	55.1	57.8	59.5	60.5	57.0	49.5	47.5	43.9	41.2	39.7	56.8	58.0	48.3

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